Feb 17, 1999 8:00 am Secretary of State

02-17-1999 90040 050 ***158.75

- I LOGICO EL COR CIRON ILOS POCES DIONE ACOLONIAS DE CENTRAL DE CONTRACTO DE CONTR

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L51044

1. Corporation Name

PULSE MEDICAL, INC.

| | | | | | | 1 | |)] 115 11 1 311 1 31 | | ini riki kici | m |
|---|---|--|--|--|---|----------------------------|---|---|---|---------------------------------|----------------------------|
| Principal Place | e of Business | Mailing Address | | | · · · · · · · · · · · · · · · · · · · | 7 |) 100 (101 ani ani at | | IIK e jeki eleli a | (MIS MENUS MINIS | 1881 |
| 4131 SW 47TH | AVE | 4131 SW 47TH AVE. | | | | | | | | • ., | |
| SUITE 1404 | | SUITE 1404 DAVIE FL 33314 | | | | DO NOT WRITE IN THIS SPACE | | | | | |
| DAVIE FL 33314 US | | US US | | | | 3. Dat | te Incorporated or Qualit | | 1 | | \neg |
| • | | •• | | | | 1 | 2/19/1990 | | | | |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | _ | | | | Number | | | Applied Fo | r |
| 21 | | 26 | | | | 65 | 5-017 <u>52</u> 51 | | | Not Applica | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Cer | rtifcate of Status Desired | d 26 | \$8.7 پر | 5 Additiona | al le |
| 22 | | 27 | _ | | | | <u> </u> | | | Required | |
| City & State | е | City & State | | | | 1 | ection Campaign Financi | ^{ng} 🗆 | | 00 May Be led to Fees | |
| Zip | Country | 28 Zip | Coul | ntrv | | | is corporation owes the | current vear | | eu to rees | \rightarrow |
| 24 | 25 | 29 | 30 | , | | | rsonal Property Tax. | current year | Yes | □No | |
| 24 | 9. Name and Address of C | | 1901 | | | | me and Address of Ne | w Register | ed Agent | | |
| | · · · · · · · · · · · · · · · · · · · | | | 81 | Name | | | | | | |
| | CE, GORDON | | - | 82 | Street Addre | ess (P.O. | Box Number is Not Acce | eptable) | | | \dashv |
| | S.W. 47TH AVE. | | | | | 000 (i | 1 38,450 CH 4, \$ 1 50 | 9 44.4 547.4 5 | es or specific | 14 50 to \$3000 | 1701 |
| | E #1404 | | | 83 | | | 三人名英格兰斯 | 人。 当時提出 | | | |
| DAVI | E FL 33314 | | ŀ | 84 | City | | 2 | | 85 | Zip Code | +2-11- |
| | | | | | - | | | F | ·L | · | |
| 11. Pursuant | to the provisions of Sections 60 | 7.0502 and 607.1508, Florida Statut | es, the at | ove-i | | oration cul | ibmits this statement for | the purpose | of changing | g its register s registered | ed |
| | egistered agent or both in the | State of Florida. Such change was a | uithorized | by th | named corpo ne corporation | on's board | l of directors, I hereby ac | ccept the ap | | | |
| agent. I a | egistered agent, or both, in the | State of Florida. Such change was a obligations of, Section 607.0505, Flo | iuthorized orida Statu | by th | ne corporation | on's board | of directors. I hereby ac | cept the ap | • : | | ٠., |
| agent. I a | egistered agent, or both, in the m familiar with, and accept the | obligations of, Section 607.0505, Flo | orida Statu | by th ites. | ne corporation | on's board | of directors. I nereby ac | cept the ap | | · ` | |
| SIGNATURE | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe | obligations of, Section 607.0505, Flo | erida Statu | by th ites. | named corporation | on's board | ating), ∵⊹√, | DATE | • | - يستي ٠ | |
| SIGNATURE | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe | obligations of, Section 607.0505, Flo | Registered | by th ites. | ne corporation | on's board d when reinsta | ating) | DATE | • | CTORS IN 1 | 12 |
| SIGNATURE 12. | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS | erida Statu | by thites. Agent s | ne corporation | on's board d when reinsta | ating), ∵⊹√, | DATE | AND DIRE | CTORS IN 1 | 12 |
| SIGNATURE 12. TITLE NAME | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS | Registered 13. 1.1 TIT | Agent s | ne corporation | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 | 12 |
| agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS | Registered 13. 1.1 TIT 1.2 NA 1.3 STI | Agent s | signature required | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 | 12 |
| SIGNATURE 12. TITLE NAME | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS | Registered 13. 1.1 TIT 1.2 NA 1.3 STI | Agent s LE ME REET A Y-ST-1 | signature required | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 | - I2 Idition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE S AND DIRECTORS | E- Registered 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT | Agent s LE ME REET A Y-ST-2 | signature required | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 | - I2 Idition |
| agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE S AND DIRECTORS | 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA | Agent s LE ME REET A Y-ST-1 | signature required | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 | - I2 Idition |
| agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE S AND DIRECTORS | : Registered 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI | Agent s LE ME REET A Y-ST-1 | ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 | ddition |
| 3 agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE S AND DIRECTORS | : Registered 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI | Agent s Agent s LE ME REET A Y-ST-2 LE ME REET A | ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 | ddition |
| agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE AS AND DIRECTORS DELETE | E Registared 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CI 2.4 CI | Agent s LE ME REET A Y-ST-; LE ME REET A TY-ST- | ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 | ddition |
| Agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE AS AND DIRECTORS DELETE | TREGISTATE 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA | Agents LE ME REET A YY-ST-1 LE ME REET A TY-ST-1 LE ME REET A | ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 | ddition |
| agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS DELETE | TREGISTATE 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI | Agent s Agent s LE ME REET A TY-ST- LE ME REET A TY-ST- LE ME REET A | ADDRESS ADDRESS ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE Cha | CTORS IN 1 nge | ddition |
| Agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE AS AND DIRECTORS DELETE | E Registered 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 4.1 TIT | by the tree. Agent's LE ME REET A Y-ST-1 LE ME REET A TY-ST-1 LE ME REET A TY-ST-1 LE | ADDRESS ADDRESS ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE Cha | CTORS IN 1 | ddition |
| Agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS DELETE | E Registered 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA | by th ttes. Agent s LE ME REET A Y-ST-1 LE ME REET A TY-ST-1 LE ME REET A TY-ST-1 LE ME REET A ME | ADDRESS ADDRESS ADDRESS ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE Cha | CTORS IN 1 nge | ddition |
| Agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS DELETE | 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 4.2 NA 4.3 STI 4.4 STI | by th ttes. Agent's LE ME REET A TY-ST-1 LE ME REET A TY-ST-1 LE AME REET A TY-ST-1 LE REET A REET A REET A REET A | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE Cha | CTORS IN 1 nge | ddition |
| Agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS DELETE DELETE DELETE DELETE | E Registered 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 4.2 NA 4.3 STI 4.4 CIT 4 | Agents LE ME REET A TY-ST-1 LE ME REET A TY-ST-1 LE ME REET A TY-ST-1 LE REET A TY-ST-1 LE REET A TY-ST-1 REET A | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE Cha | CTORS IN 1 nge | 12 Idition |
| Agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS DELETE | 13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 4.2 NA 4.3 STI 4.4 STI | Agent s Agent s LE ME REET A TY-ST-1 LE ME REET A TY-ST-1 LE AME REET A TY-ST-1 LE AME REET A LE LE LE LE LE LE LE LE LE L | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS | on's board d when reinsta | ating) | DATE | AND DIRE | CTORS IN 1 nge | 12 Idition |
| Agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS DELETE DELETE DELETE DELETE | E Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 4.3 ST 4.4 CIT 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA | by the the state of the state o | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS | on's board d when reinsta | eting). DITIONS/CHANGES TO | DATE | AND DIRE | CTORS IN 1 nge | 12 Idition |
| agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS SITY-ST-ZIP TITLE NAME STREET ADDRESS | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS DELETE DELETE DELETE DELETE | E Registared 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4. CI 4.1 TIT 4.2 NV 4.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST | by the the state of the state o | ADDRESS ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP | on's board d when reinsta | eting). DITIONS/CHANGES TO | DATE | AND DIRE | CTORS IN 1 nge | 12 Idition |
| Agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS DELETE DELETE DELETE DELETE | E Registared 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4. CI 4.1 TIT 4.2 NV 4.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST | Agent s Agent s LE ME REET A TY-ST- LE ME REET A TY-ST- LE LE ME REET A | ADDRESS ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP | on's board d when reinsta | eting). DITIONS/CHANGES TO | DATE | AND DIRE | CTORS IN 1 nge | 12 ddition ddition ddition |
| Agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of registe OFFICEF V BOYCE, GORDON 10505 N.W. 5TH CT. PLANTATION FL P BOYCE, BARBARA 10505 N.W. 5TH CT. PLANTATION FL | obligations of, Section 607.0505, Flored agent and title if applicable (NOTE RS AND DIRECTORS DELETE DELETE | E Registared 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 4.3 ST 4.4 CIT 4.1 TIT 4.2 NV 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST 5.4 CIT | Agent s LE ME REET A TY-ST- LE LE LE LE LE LE LE LE LE L | ADDRESS ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP | on's board d when reinsta | eting). DITIONS/CHANGES TO | DATE | AND DIRE Cha | CTORS IN 1 nge | 12 ddition ddition ddition |

14. hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CiTY-ST-ZIP