

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000077315

FILED
Jun 18, 2012
Secretary of State

Entity Name: KAIZEN MEDICAL SERVICES, INC.

Current Principal Place of Business:

2529 SW 8 ST.
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

2529 SW 8 ST.
MIAMI, FL 33135

New Mailing Address:

FEI Number: 20-2912809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA, SAUL P
561 NW 48TH PL
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: ACOSTA, SAUL
Address: 561 NW 48TH PL
City-St-Zip: MIAMI, FL 33126

Title: VP
Name: ACOSTA, SERGIO
Address: 561 NW 48TH PL
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SAUL ACOSTA

P

06/18/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date