2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2011
Secretary of State

DOCUMENT# P05000159045

Entity Name: SKYMED FLORIDA, INC.

Current Principal Place of Business:

3444 EAST LAKE ROAD
SUITE 412
PALM HARBOR, FL 34685 US

New Principal Place of Business:

220 NORTH PINE AVENUE
SUITE A
OLDSMAR, FL 34677 US

Current Mailing Address:

3444 EAST LAKE ROAD
SUITE 412
PALM HARBOR, FL 34685 US

New Mailing Address:

220 NORTH PINE AVENUE
SUITE A
OLDSMAR, FL 34677 US

FEI Number: 20-3888908 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBERT F. DIMARCO, CPA PA
3444 EAST LAKE ROAD
SUITE 412
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

ROBERT F. DIMARCO, CPA PA
220 NORTH PINE AVENUE
SUITE A
OLDSMAR, FL 34677 US

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: _____ 04/27/2011
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P/S
Name: STEVEN, MESDOM
Address: 220 NORTH PINE AVENUE
City-St-Zip: OLDSMAR, FL 34677 US

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: STEVEN MESDOM P/S 04/27/2011
Electronic Signature of Signing Officer or Director — Date