2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2012
Secretary of State

DOCUMENT# J82798

Entity Name: FLARE MEDICAL SERVICES CORP.

Current Principal Place of Business:

8370 W. FLAGLER STREET
SUITE 120
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

2311 SW 5TH AVE
MIAMI, FL 33129

New Mailing Address:

FEI Number: 59-2827026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MUNOZ, LILIAN
2311 SW 5TH AVE
MIAMI, FL 33129 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: PDST
Name: MUNOZ, CARMEN
Address: 8370 W. FLAGLER STREET SUITE # 120
City-St-Zip: MIAMI, FL 33144

Title: S
Name: MUNOZ, CARMEN
Address: 8370 W. FLAGLER STREET SUITE # 120
City-St-Zip: MIAMI, FL 33144

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: CARMEN MUNOZ PDST 04/10/2012

Electronic Signature of Signing Officer or Director Date