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 617, Florida Statutes; and that my name appears	
above, or on an attachment with all other like empowered.	

SIGNATURE: PATRICIA FERNANDEZ

I

Electronic Signature of Signing Officer/Director Detail

# 421 N 21ST AVENUE

## FEI Number: 26-3582756

## Name and Address of Current Registered Agent:

FERNANDEZ, PATRICIA 421 N 21ST AVENUE HOLLYWOOD, FL 33020 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:	PATRICIA FERNANDEZ			04/15/2018	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title F	PRESIDENT	Title	TREASURER		
Name C	QURESHI, NABEEL	Name	FERNANDEZ, PATRICIA		
Address 4	421 N 21ST AVENUE	Address	421 N 21ST AVENUE		
City-State-Zip: H	HOLLYWOOD FL 33020	City-State-Zip:	HOLLYWOOD FL 33020		

## Certificate of Status Desired: No

FILED Apr 15, 2018

Secretary of State

CC4274846414

04/15/2018

TREASURER

Date

## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N1000009567

Entity Name: BIOMEDICAL SCIENCE SOCIETY INC.

## **Current Principal Place of Business:**

421 N 21ST AVENUE HOLLYWOOD, FL 33020

## **Current Mailing Address:**

HOLLYWOOD, FL 33020