

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F57469

**Entity Name:** EMERGENCY MEDICAL INTERNATIONAL, INC.

**Current Principal Place of Business:**

4596 NW 97 PLACE  
DORAL, FL 33178

**Current Mailing Address:**

4596 NW 97 PLACE  
DORAL, FL 33178 US

**FEI Number:** 59-2148523

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROCHA, MURILO PUNDEK SR.  
1055 WEEPING WILLOW WAY  
HOLLYWOOD, FL 33019 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:** MURILO ROCHA

03/20/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name ROCHA, MURILO P.  
Address RUA MAESTRO CARDIM, 343 CJ.32  
City-State-Zip: LIBERDADE SAO PABLO- SP- BRASIL  
01323-000

Title PRESIDENT  
Name ROCHA, ANDRE  
Address RUA ARIZONA 1051  
221 B  
City-State-Zip: SAO PABLO SAO PABLO 04567030

Title CORRESPONDING SECRETARY  
Name ROCHA, MURILO P.  
Address RUA MAESTRO CARDIM, 343 CJ.32  
City-State-Zip: LIBERDADE SAO PABLO 01323-000

*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:** MURILO ROCHA

CEO

03/20/2020

Electronic Signature of Signing Officer/Director Detail

Date