

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000076774

Entity Name: VETIMED, INC.

Current Principal Place of Business:

1820 N CORPORATE LAKES BLVD
SUITE 301
WESTON, FL 33326

Current Mailing Address:

1820 N CORPORATE LAKES BLVD
SUITE 301
WESTON, FL 33326

FEI Number: 65-1127558

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RESTREPO, DIEGO L
2600 SOUTH DOUGLAS ROAD
SUITE 1000
CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DPT
Name VALLECILLA, LILIANA
Address 1820 N CORPORATE LAKES BLVD.,
SUITE 301
City-State-Zip: WESTON FL 33326

Title S
Name BORGES, LOURDES M
Address 1820 N CORPORATE LAKES BLVD.,
SUITE 301
City-State-Zip: WESTON FL 33326

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: LOURDES M BORGES

S

01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date