

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000082433

Entity Name: LEATHER MEDIC SERVICES INC.

Current Principal Place of Business:

5565 LEE ST # 1
LEHIGH ACRES, FL 33971

Current Mailing Address:

5565 LEE ST # 1
LEHIGH ACRES, FL 33971

FEI Number: 57-1140946

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIFE, CHADE
5565 LEE ST
1
LEHIGH ACRES, FL 33971 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	P	Title	SEC
Name	LIFE, CHADE	Name	LIFE, IVETTE
Address	5565 LEE ST # 1	Address	5565 LEE ST # 1
City-State-Zip:	LEHIGH ACRES FL 33971	City-State-Zip:	LEHIGH ACRES FL 33971

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: CHADE LIFE

PRESIDENT

01/05/2014

Electronic Signature of Signing Officer/Director Detail

Date