

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000980

Entity Name: NEUROLOGY MOBILE SYSTEM ASSOCIATES INC.

Current Principal Place of Business:

7374 S.W. 93 AVENUE
SUITE 201
MIAMI, FL 33173

Current Mailing Address:

7374 S.W. 93 AVENUE
SUITE 201
MIAMI, FL 33173

FEI Number: 65-1180239

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ALFARO, ROSARIO M
7374 SW 93 AVENUE
SUITE 201
MIAMI, FL 33173 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: ROSARIO M ALFARO

01/20/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name ALFARO, ROSARIO M
Address 7374 SW 93 AVE, SUITE 201
City-State-Zip: MIAMI FL 33165

Title P
Name ALFARO, ROSARIO M
Address 7374 S.W. 93 AVENUE
SUITE 201
City-State-Zip: MIAMI FL 33173

Title VP
Name ALFARO, ROSARIO M
Address 7374 S.W. 93 AVENUE
SUITE 201
City-State-Zip: MIAMI FL 33173

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: ROSARIO M ALFARO

CEO

01/20/2014

Electronic Signature of Signing Officer/Director Detail

Date