

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000019657

**Entity Name:** SAFE GUARD MEDI-SYSTEMS CORP

**Current Principal Place of Business:**

21301 NORTHEAST 20TH AVENUE  
NORTH MIAMI BEACH, FL 33179

**Current Mailing Address:**

21301 NORTHEAST 20TH AVENUE  
NORTH MIAMI BEACH, FL 33179 US

**FEI Number:** 20-2376882

**Certificate of Status Desired:** Yes

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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            PSTD  
Name            EISENBERG, NORMAN  
Address        21301 NORTHEAST 20TH AVENUE  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title            VP  
Name            SLAVIN, DOUGLAS M.D.  
Address        1111 KANE CONCOURSE SUITE 111  
City-State-Zip: BAY HARBOUR FL 33154

*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: NORMAN EISENBERG

PRESIDENT

03/22/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date