

**2019 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P08000021602

**Entity Name:** BIO-TECH MEDICAL SOFTWARE, INC.**Current Principal Place of Business:**6750 N ANDREWS AVENUE  
SUITE 325  
FORT LAUDERDALE, FL 33309**Current Mailing Address:**6750 N ANDREWS AVENUE  
SUITE 325  
FORT LAUDERDALE, FL 33309 US**FEI Number:** 20-8551162**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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:** JOSIE SORENSEN

09/23/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHIEF SOFTWARE ARCHITECT  
Name FERRARO, TERENCE J  
Address 6750 N ANDREWS AVENUE  
SUITE 325  
City-State-Zip: FORT LAUDERDALE FL 33309

Title CEO  
Name VENEGAS, ZACHARY  
Address 6750 N ANDREWS AVENUE  
SUITE 325  
City-State-Zip: FORT LAUDERDALE FL 33309

Title CFO  
Name OGUR, SCOTT  
Address 6750 N ANDREWS AVENUE  
SUITE 325  
City-State-Zip: FORT LAUDERDALE FL 33309

Title COO  
Name AFANEH, MOHAMMAD  
Address 6750 N ANDREWS AVENUE  
SUITE 325  
City-State-Zip: FORT LAUDERDALE FL 33309

Title CTO  
Name TERRELL, DAVID  
Address 6750 N ANDREWS AVENUE  
SUITE 325  
City-State-Zip: FORT LAUDERDALE FL 33309

*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:** MOHAMMAD AFANEH

COO

09/23/2019

Electronic Signature of Signing Officer/Director Detail

Date