

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000076233

Entity Name: NEW SOLUTIONS MEDICAL CORPORATION

Current Principal Place of Business:

KASSON RD BOX 117
CAMILLUS, NY 13031

Current Mailing Address:

PO BOX 117
CAMILLUS, NY 13031 US

FEI Number: 26-3194373

Certificate of Status Desired: No

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 AGRICOLA, JON
Address KASSON RD BOX 117
City-State-Zip: CAMILLUS NY 13031

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: JON AGRICOLA

DIRECTOR

02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date