

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000020886

Entity Name: CRITICAL MEDICAL EDUCATION & TRAINING, INC.

Current Principal Place of Business:

1835 S. PERIMETER ROAD - SUITE 170
FORT LAUDERDALE, FL 33309

Current Mailing Address:

1835 S. PERIMETER ROAD - SUITE 170
FORT LAUDERDALE, FL 33309

FEI Number: 27-2035524

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SADLIER, RUTH A
5012 S CHRYSTIE CIRCLE
DELRAY BEACH, FL 33484 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
Name SADLIER, RUTH A
Address 5012 S CHRYSTIE CIRCLE
City-State-Zip: DELRAY BEACH FL 33484

Title T
Name RUSH, KIMBERLY
Address 15731 85TH ROAD NORTH
City-State-Zip: LOXAHATCHEE FL 33470

Title S
Name SIMMONS, KATHY A
Address 9233 BUENA MESA DRIVE
City-State-Zip: NEW PORT RICHEY FL 34655

Title VP
Name BANKS, THOMAS WJR.
Address 1835 S. PERIMETER ROAD - SUITE
170
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: RUTH A. SADLIER

PRESIDENT

04/09/2013

Electronic Signature of Signing Officer/Director Detail

Date