## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000103805

Entity Name: MED-CHARGE SERVICES, INC.

**Current Principal Place of Business:** 

1612 NW BOCA RATON BLVD

UNIT 9

BOCA RATON, FL 33432

## **Current Mailing Address:**

3051 S OCEAN BLVD 503

BOCA RATON, FL 33132 US

FEI Number: 90-0803008 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MCCORMICK, PATRICE S 1612 NW BOCA RATON BLVD UNIT 9 BOCA RATON, FL 33432 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

FILED Jan 23, 2014

**Secretary of State** 

CC9814599377

## Officer/Director Detail:

Title P

Name MCCORMICK, PATRICE S
Address 1612 NW BOCA RATON BLVD

UNIT 9

City-State-Zip: BOCA RATON FL 33432

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: PATRICE S MCCORMICK

01/23/2014

**OWNER** 

Date