

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000084254

Entity Name: LOR-MEDICAL, INC.

Current Principal Place of Business:

2821 SWIFTON DRIVE
SARASOTA, FL 34231

Current Mailing Address:

2821 SWIFTON DRIVE
SARASOTA, FL 34231 US

FEI Number: 46-1130168

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LLABRES, LORELEI
2821 SWIFTON DRIVE
SARASOTA, FL 34231 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 LLABRES, LORELEI
Address 2821 SWIFTON DRIVE
City-State-Zip: SARASOTA FL 34231

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: LORELEI LLABRES

OWNER/OPERATOR

03/17/2016

Electronic Signature of Signing Officer/Director Detail

Date