Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000042095

Entity Name: ANALYTICAL PROVIDER, CORP

Current Principal Place of Business:

3650 NW 82 AVE. SUITE 404 DORAL, FL 33166

Current Mailing Address:

3650 NW 82 AVE. SUITE 404 DORAL, FL 33166 US

FEI Number: 42-1775191

Name and Address of Current Registered Agent:

SOUZA CRUZ, ROBERTO DE 3650 NW 82 AVE. SUITE 404 DORAL, FL 33166 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

Officer/Director Detail ·

| Title | Р | Title | VP |
|-----------------|--------------------------|-----------------|---------------------------|
| Name | SOUZA CRUZ, ROBERTO DE | Name | ORSINO NASCIMENTO, RENATO |
| Address | 20255 NE 34TH CT APT 812 | Address | 20255 NE 34TH CT APT 812 |
| City-State-Zip: | AVENTURA FL 33180 | City-State-Zip: | AVENTURA FL 33180 |

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: ROBERTO DE SOUZA CRUZ

PRESIDENT

03/12/2015

Date

FILED Mar 12, 2015 Secretary of State CC3411233585

Certificate of Status Desired: No

Date