## 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: ADIN, PATRICE R

Electronic Signature of Signing Officer/Director Detail

#### 2018 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P15000021349

Entity Name: WORLD MEDICAL SERVICES COMPANY, INC.

#### **Current Principal Place of Business:**

1201 S OCEAN DRIVE STE 2208 HOLLYWOOD, FL 33019

#### **Current Mailing Address:**

1201 S OCEAN DRIVE STE 2208 HOLLYWOOD, FL 33019 US

#### FEI Number: 47-3634324

### Name and Address of Current Registered Agent:

FELIX, DONY J 1201 S OCEAN DRIVE STE 2208 HOLLYWOOD, FL 33019 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:	FELIX DONY J			04/12/2018
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	P	Title	VP	
Name	ADIN, PATRICE R	Name	FELIX, DONY JOSHUA	
Address	400 SUNNY ISLES BLVD	Address	1201 S OCEAN DRIVE	
City-State-Zip:	SUNNY ISLES FL 33160	City-State-Zip:	STE 2208 HOLLYWOOD FL 33019	

Certificate of Status Desired: No

Ρ

04/12/2018 Date