

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000065345

**Entity Name:** MEDCOM CORP

**Current Principal Place of Business:**

15885 SW 69TH STREET  
MIAMI, FL 33193

**Current Mailing Address:**

15885 SW 69TH STREET  
MIAMI, FL 33193 US

**FEI Number:** 81-3519736

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FINANCIAL SOLUTIONS MSC CORP  
848 BRICKELL AVENUE  
SUITE NO 617  
MIAMI, FL 33131 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            S  
Name            PALACIO, LUIS  
Address        15885 SW 69TH STREET  
City-State-Zip: MIAMI FL 33193

Title            P  
Name            COTES MAYA, ALFONSO E  
Address        15885 SW 69TH STREET  
City-State-Zip: MIAMI FL 33193

*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:** LUIS PALACIO

**SECRETARY**

**03/14/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date