

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000004355

**Entity Name:** LE MED INC

**Current Principal Place of Business:**

139 SANTA LOUISA  
IRVINE, CA 92606

**Current Mailing Address:**

139 SANTA LOUISA  
IRVINE, CA 92606 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

RAMCHANDANI, SUNIL  
251 S. STATE RD7  
PLANTATION, FL 33317 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 PRES  
Name HAJJAR, TAMARA J  
Address 139 SANTA LOUISA  
City-State-Zip: IRVINE CA 92606

Title VP  
Name HAJJAR, AMAL  
Address 139 SANTA LOUISA  
City-State-Zip: IRVINE CA 92606

*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:** TAMARA HAJJAR

**PRESIDENT**

**01/14/2021**

Electronic Signature of Signing Officer/Director Detail

Date