

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000044357

Entity Name: MEDICAL LFKT, INC.

Current Principal Place of Business:

848 GOLDEN CANE DRIVE
WESTON, FL 33327

Current Mailing Address:

1001 N FEDERAL HWY
SUITE 355
HALLANDALE BEACH, FL 33009 US

FEI Number: 84-1903732

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DURAN GROUP & ASSOCIATES, P.A.
1001 N FEDERAL HWY
SUITE 355
HALLANDALE BEACH, FL 33009 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/T | Title | VP/S |
| Name | FEKETE EDELMAN, BENJAMIN | Name | FEKETE CORSER, BRAYAN |
| Address | 848 GOLDEN CANE DRIVE | Address | 848 GOLDEN CANE DRIVE |
| City-State-Zip: | WESTON FL 33327 | City-State-Zip: | WESTON FL 33327 |

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: BENJAMIN FEKETE EDELMAN

PRESIDENT

06/28/2020

Electronic Signature of Signing Officer/Director Detail

Date