

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000093003

Entity Name: EDGEMED HEALTHCARE SOLUTIONS INC.

Current Principal Place of Business:

4800 T-REX AVENUE SUITE 200
BOCA RATON, FL 33431

Current Mailing Address:

4800 T-REX AVENUE SUITE 200
BOCA RATON, FL 33431 US

FEI Number: 65-0820431

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KURSTIN, RYAN
4800 T-REX AVENUE, SUITE 200
BOCA RATON, FL 33431 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	Title	ST
Name	KURSTIN, RYAN	Name	KURSTIN, SCOTT COO
Address	4800 TREX AVENUE SUITE 200	Address	4800 TREX AVENUE SUITE 200
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431

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: RYAN KURSTIN

PRESIDENT

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date