2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2016
Secretary of State
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Entity Name: ELMED MEDICAL SYSTEMS, INC.

Current Principal Place of Business:

3956 TOWN CENTER BLVD
STE 217
ORLANDO, FL 32837

Current Mailing Address:

3956 TOWN CENTER BLVD
STE 217
ORLANDO, FL 32837 US

FEI Number: 58-2410836

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, AXEL
3956 TOWN CENTER BLVD
STE 217
ORLANDO, FL 32837 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	PSD	Title	VP
Name	LOPEZ, AXEL G	Name	LOPEZ, EVANA
Address	3956 TOWN CENTER BLVD STE 217	Address	3956 TOWN CENTER BLVD STE 217
City-State-Zip:	ORLANDO FL 32837	City-State-Zip:	ORLANDO FL 32837

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: AXEL LOPEZ PSD 04/02/2016

Electronic Signature of Signing Officer/Director Detail — Date