

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000024942

Entity Name: SJS MED SALES, LLC

Current Principal Place of Business:

400 NORTHLAKE COURT
APT 105
NORTH PALM BEACH, FL 33408

Current Mailing Address:

400 NORTHLAKE COURT
APT 105
NORTH PALM BEACH, FL 33408 US

FEI Number: 27-5376965

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STAFFORD FIRM ,PA
2290 10TH AVE NORTH
SUITE 302
LAKE WORTH, FL 33461 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

Authorized Person(s) Detail :

Title CEO
Name STAFFORD, SHAUN J
Address 400 NORTHLAKE COURT APT 105
City-State-Zip: NORTH PALM BEACH FL 33408

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHAUN J. STAFFORD

CEO

01/31/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date