## 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000404

Entity Name: MEDIVATORS INC.

**Current Principal Place of Business:** 

14605 28TH AVENUE NORTH MINNEAPOLIS. MN 55447

**Current Mailing Address:** 

14605 28TH AVENUE NORTH MINNEAPOLIS, MN 55447

FEI Number: 41-1229121 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 DIRECTOR Title VP

Name SHELDON, CRAIG Name HELMS, PAUL

Address 150 CLOVE ROAD Address 14605 28TH AVENUE NORTH

City-State-Zip: LITTLE FALLS NJ 07424 City-State-Zip: MINNEAPOLIS MN 55447

Title STVP Title PRESIDENT AND CEO, DIRECTOR

Name FINKLE, KEVIN Name HANSEN, JORGEN B

Address 14605 28TH AVENUE NORTH Address 150 CLOVE ROAD, 9TH FLOOR

City-State-Zip: MINNEAPOLIS MN 55447 City-State-Zip: LITTLE FALLS NJ 07424

Title DIRECTOR

Name KRAKAUER, ANDREW

Address 150 CLOVE ROAD, 9TH FLOOR

City-State-Zip: LITTLE FALLS NJ 07424

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: KEVIN FINKLE STVP 03/13/2015

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 13, 2015

**Secretary of State** 

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