

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000000411

**Entity Name:** MEDEXPERT CONSULTING, INC.

**Current Principal Place of Business:**

3956 TOWN CENTER BLVD.  
SUITE 457  
ORLANDO, FL 32837

**FILED**  
**Jan 26, 2016**  
**Secretary of State**  
**CC1667294206**

**Current Mailing Address:**

3956 TOWN CENTER BLVD.  
SUITE 457  
ORLANDO, FL 32837 US

**FEI Number: 45-0968640**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MINNING, DENA  
3956 TOWN CENTER BLVD.  
SUITE 457  
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: DENA MINNING**

**01/26/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MINNING, DENA  
Address        3956 TOWN CENTER BLVD.  
                  SUITE 457  
City-State-Zip: ORLANDO FL 32837

Title            SECRETARY  
Name            MINNING, DENA  
Address        3956 TOWN CENTER BLVD.  
                  SUITE 457  
City-State-Zip: ORLANDO FL 32837

Title            TREASURER  
Name            MINNING, DENA  
Address        3956 TOWN CENTER BLVD.  
                  SUITE 457  
City-State-Zip: ORLANDO FL 32837

Title            DIRECTOR  
Name            MINNING, DENA  
Address        3956 TOWN CENTER BLVD.  
                  SUITE 457  
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: DENA MINNING**

**PRESIDENT**

**01/26/2016**

Electronic Signature of Signing Officer/Director Detail

Date