2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002445

Entity Name: 180 MEDICAL, INC.

Current Principal Place of Business:

5324 WEST RENO SUITE A OKLAHOMA CITY, OK 73127

Current Mailing Address:

5324 WEST RENO SUITE A OKLAHOMA CITY, OK 73127 US

FEI Number: 13-4211220

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US FILED Apr 25, 2014 Secretary of State CC3454187903

Certificate of Status Desired: No

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 | CFO | Title | PRESIDENT, DIRECTOR, CEO |
|-----------------|---|-----------------|--------------------------------------|
| Name | LUMBAR, FRANK L | Name | BROWN, DANIEL T |
| Address | 5324 WEST RENO SUITE A | Address | 5324 WEST RENO SUITE A |
| City-State-Zip: | OKLAHOMA CITY OK 73127 | City-State-Zip: | OKLAHOMA CITY OK 73127 |
| Title | COO, DIRECTOR | Title | SECRETARY, TREASURER, |
| | | | |
| Name | HOWELL, RONALD D | | DIRECTOR |
| | - , - | Name | DIRECTOR CANNON, JOHN PETER |
| Name Address | HOWELL, RONALD D 5324 WEST RENO SUITE A | Name Address | CANNON, JOHN PETER 5324 WEST RENO |
| | 5324 WEST RENO | | CANNON, JOHN PETER |

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: FRANK L. LUMBAR

CFO

Electronic Signature of Signing Officer/Director Detail