

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000004389

**Entity Name:** DYSIS MEDICAL INC.

**Current Principal Place of Business:**

DYSIS MEDICAL LTD,ALBA INNOV CTR UNIT 1.15  
LIVINGSTON, WEST LOTHIAN  
SCOTLAND EH54 7GA, XX

**Current Mailing Address:**

DYSIS MEDICAL LTD, C/O NAIL & CO.  
11TH FL WHITEFRIARS, LEWINS MEAD  
BRISTOL BS1 2NT, UK, XX XX

**FEI Number:** 90-0961648

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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	D	Title	S
Name	ATKINSON, ALASTAIR	Name	DAVIDSON, SUSAN
Address	4 RATTRAY LOAN, EDINBURGH	Address	13 WRIGHT AVE, BATHGATE WEST LOTHIAN
City-State-Zip:	SCOTLAND EH10 5TQ UK XX	City-State-Zip:	SCOTLAND EH48 2UU UK XX

*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:** SUSAN DAVIDSON

**SECRETARY**

**04/07/2014**

Electronic Signature of Signing Officer/Director Detail

Date