2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30875

Entity Name: MEDICAL DEVICE TECHNOLOGIES, INC.

Current Principal Place of Business:

272 EAST DEERPATH

SUITE 212

LAKE FOREST, IL 60045

Current Mailing Address:

272 EAST DEERPATH

SUITE 212

LAKE FOREST, IL 60045 US

FEI Number: 36-3723996 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC. 155 OFFICE PLAZA DRIVE 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:

City-State-Zip:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 22, 2015

Secretary of State

CC1968580967

Officer/Director Detail:

Title PRESIDENT Title VP

Name HUDSON, MICHAEL J Name MCNALLY, SHARON C.
Address 272 EAST DEERPATH Address 272 EAST DEERPATH

SUITE 212 SUITE 212

LAKE FOREST IL 60045 City-State-Zip: LAKE FOREST IL 60045

Title SECRETARY Title TREASURER

Name FEATHER, WILLIAM L. Name ADLOFF, RICHARD C.

Address 272 EAST DEERPATH Address 272 EAST DEERPATH

SUITE 212 SUITE 212

City-State-Zip: LAKE FOREST IL 60045 City-State-Zip: LAKE FOREST IL 60045

Title DIRECTOR Title DIRECTOR

Name DAMICO, JOSEPH F. Name MCGINLEY, JACK

Address 272 EAST DEERPATH Address 272 EAST DEERPATH

SUITE 212 SUITE 212

LAKE FOREST IL 60045 City-State-Zip: LAKE FOREST IL 60045

Title DIRECTOR Title DIRECTOR

Name KUHR, LEONARD G. Name COLLISTER, CRAIG

Address 272 EAST DEERPATH Address 272 EAST DEERPATH

SUITE 212 SUITE 212

City-State-Zip: LAKE FOREST IL 60045 City-State-Zip: LAKE FOREST IL 60045

Continues on page 2

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: SHARON C. MCNALLY VICE PRESIDENT 04/22/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name SISTERMAN, ROGER

Address 272 EAST DEERPATH

SUITE 212

City-State-Zip: LAKE FOREST IL 60045