

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004931

Entity Name: MDS AMERICA, INC.

FILED  
Apr 06, 2009  
Secretary of State

## Current Principal Place of Business:

800 SE LINCOLN AVE  
STUART, FL 34994

## New Principal Place of Business:

## Current Mailing Address:

800 SE LINCOLN AVE  
STUART, FL 34994

## New Mailing Address:

FEI Number: 38-3591669

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICES COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: KIRKPATRICK, HAROLD  
Address: 800 SE LINCOLN AVE  
City-St-Zip: STUART, FL 34994

Title: COO ( ) Delete  
Name: BLOND, PETER  
Address: 800 SE LINCOLN AVE  
City-St-Zip: STUART, FL 34994

Title: BM ( ) Delete  
Name: ALSABAH, NASSER  
Address: 800 SE LINCOLN AVE  
City-St-Zip: STUART, FL 34994

Title: BM ( ) Delete  
Name: ALSABAH, ABDULLAH  
Address: 800 SE LINCOLN AVE  
City-St-Zip: STUART, FL 34994

Title: BM ( ) Delete  
Name: SKELDING, RITCHIE  
Address: 800 SE LINCOLN AVE.  
City-St-Zip: STUART, FL 34994

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PETER BLOND

COO

04/06/2009

Electronic Signature of Signing Officer or Director

Date