

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001355

FILED
Feb 16, 2012
Secretary of State

Entity Name: COMPUTERIZED MEDICAL SYSTEMS, INC.

Current Principal Place of Business:

13723 RIVERPORT DRIVE
STE 100
MARYLAND HEIGHTS, MO 63043

New Principal Place of Business:

Current Mailing Address:

13723 RIVERPORT DRIVE
STE 100
MARYLAND HEIGHTS, MO 63043

New Mailing Address:

FEI Number: 94-3262540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: PD
Name: HOEY, JAY
Address: 100 MATHILDA PLACE, 5TH FLOOR
City-St-Zip: SUNNYVALE, CA 94086

Title: ST
Name: TIETZE, CONNIE F
Address: 100 MATHILDA PLACE, 5TH FLOOR
City-St-Zip: SUNNYVALE, CA 94086

Title: SVP
Name: JEMUS, MICHELE
Address: 2050 DE BLEURY, SUITE 200
City-St-Zip: MONTREAL, QC H3A2J5

Title: D
Name: BERGSTROM, HAKAN
Address: BOX 7593
City-St-Zip: STOCKHOLM, SWEDEN, MO SE-103 93

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: CONNIE TIETZE

ST

02/16/2012

Electronic Signature of Signing Officer or Director

Date