

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003854

FILED
May 25, 2012
Secretary of State

Entity Name: BLACK LION EMERGENCY SPECIALTY SERVICE UNIT INC.

Current Principal Place of Business:

C/O 1913 S OAK HAVEN CIR
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

C/O 2075 NE 164ST APT 815
NORTH MIAMI BEACH, FL {33162}

Current Mailing Address:

C/O POST OFFICE BOX 600172
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 45-3305559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWEN MCGIBBON, STEPHEN L
C/O 1913 S OAK HAVEN CIR
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

OWEN MCGIBBON, STEPHEN L
C/O 1913 S OAK HAVEN CIR
NORTH MIAMI BEACH, FL {33179} 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:

05/25/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: OWEN MCGIBBON, STEPHEN L
Address: C/O POST OFFICE BOX 600172
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: D
Name: ADMIEL, SHALEM Y
Address: C/O POST OFFICE BOX 600172
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: D
Name: MACHADO, HELEN
Address: 410 W 33RD ST
City-St-Zip: HIALEAH, FL 33012

Title: D
Name: CURRY, PATRICK
Address: 15171 NE 13TH AVE
City-St-Zip: N.M. BEACH, FL 33162

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN MCGIBBON

D

05/25/2012

Electronic Signature of Signing Officer or Director

Date