2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2012
Secretary of State

DOCUMENT# N11000006537

Entity Name: SOUTH FLORIDA ASSOCIATION FOR MEDICAL INSTRUMENTATION, INC.

Current Principal Place of Business:

990 N.W. 69TH AVENUE
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

PO BOX 21386
FORT LAUDERDALE, FL 33335

New Mailing Address:

FEI Number: 45-3148330 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, RICHARD L
990 N.W. 69TH AVENUE
MARGATE, FL 33063 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: C
Name: MCMURTRIE, FREDERICK
Address: 514 S.W. 8TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VC
Name: CARDENAS, LUIS
Address: 1701 N.E. 1ST STREET
City-St-Zip: POMPANO BEACH, FL 33062

Title: ST
Name: MORRIS, RICHARD L
Address: 990 N.W. 69TH AVENUE
City-St-Zip: MARGATE, FL 33063

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: RICHARD L. MORRIS ST 03/05/2012

Electronic Signature of Signing Officer or Director — Date