

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 06, 2003 8:00 A.M.
Secretary of State

DOCUMENT # P00000073909

1. Entity Name
MED MC SYSTEMS, INC.

Principal Place of Business
**3106 COMMERCE PARKWAY
 MIRAMAR FL 33025**

Mailing Address
**3106 COMMERCE PARKWAY
 MIRAMAR FL 33025**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT 02
 DO NOT WRITE IN THIS SPACE

4. FEI Number **65-1075645**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**B & C CORPORATE SERVICES, INC.
 201 S. BISCAYNE BLVD.
 SUITE 3000
 MIAMI FL 33131**

Name **Kenneth Nedda**
 Street Address (P.O. Box Number is Not Acceptable) **3106 Commerce Parkway**
 City **Miramar, FL FL** Zip Code **33025**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Kenneth J. Nedda**
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **1/6/2003**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **NEDD, KESTER J D.O.**
 STREET ADDRESS **3106 COMMERCE PARKWAY**
 CITY-ST-ZIP **MIRAMAR FL 33025**

☐ Change ☐ Addition
400009921784
01/07/03--01063--004 **750.00

TITLE **T** ☐ Delete
 NAME **LAUDI, NEDO**
 STREET ADDRESS **3106 COMMERCE PARKWAY**
 CITY-ST-ZIP **MIRAMAR FL 33025**

☒ Change ☐ Addition
Lauldi Nedda

TITLE **S** ☒ Delete
 NAME **SHAPANSKY, PAUL**
 STREET ADDRESS **3106 COMMERCE PARKWAY**
 CITY-ST-ZIP **MIRAMAR FL 33025**

☐ Change ☐ Addition

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kenneth J. Nedda
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/03

954/331-6572

CR2E034 (4/02)