

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90458 045 ***150.00

DOCUMENT # P01000036505

1. Entity Name
MEDSOLUTIONS INTERNATIONAL, INC.



Principal Place of Business
**751 FLEET FINANCIAL CT. SUITE 101-105
LONGWOOD FL 32750**

Mailing Address
**751 FLEET FINANCIAL CT. SUITE 101-105
LONGWOOD FL 32750**

2. Principal Place of Business
23293 LIBERTY BELL TER.
Suite, Apt. #, etc.

3. Mailing Address
23293 LIBERTY BELL TER.
Suite, Apt. #, etc.

City & State
BOCA RATON FLORIDA
Zip
33433 Country
USA

City & State
BOCA RATON FLORIDA
Zip
33433 Country
USA

4. FEI Number **59-3709157** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SWIER, RAY
751 FLEET FINANCIAL CT
LONGWOOD FL 32750

7. Name and Address of New Registered Agent

Name
KEN CROOKER
Street Address (P.O. Box Number is Not Acceptable)
23293 LIBERTY BELL TER.
City
BOCA RATON FL Zip Code
33433

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 Crooker**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/25/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
SWIER, RAY
751 FLEET FINANCIAL CT, SUITE 101-105
LONGWOOD FL 32750 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
CROOKER, KEN
751 FLEET FINANCIAL CT, SUITE 101-105
LONGWOOD FL 32750 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
KEN CROOKER
23293 LIBERTY BELL TER.
BOCA RATON FLORIDA 33433 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Kenneth Crooker**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/03 **954-914-2000**
Date Daytime Phone #

CR2E034 (10/02)