

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000018942

Entity Name: MOMENTUM MEDICAL, INC.

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7631 DOLONITA DRIVE  
TAMPA, FL 33615

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 13509  
TAMPA, FL 33681

**New Mailing Address:**

FEI Number: 03-0390148

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LINDA, GUERIN M  
7631 DOLONITA DRIVE  
TAMPA, FL 33615 US

**Name and Address of New Registered Agent:**

GUERIN, LINDA M  
7631 DOLONITA DRIVE  
TAMPA, FL 33615 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: LINDA M GUERIN

04/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GUERIN, LINDA M  
Address: 7631 DOLONITA DRIVE  
City-St-Zip: TAMPA, FL 33615

Title: D  
Name: CROCKER, RONALD L  
Address: 4882 W. GANDY BLVD. #E-101  
City-St-Zip: TAMPA, FL 33611

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: LINDA M GUERIN

D

04/24/2012

Electronic Signature of Signing Officer or Director

Date