

**2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Apr 19, 2012  
Secretary of State**

DOCUMENT# P02000037049

Entity Name: SULAMED, INC.

**Current Principal Place of Business:**

11693 COLLIER BLVD  
NAPLES, FL 34116 US

**New Principal Place of Business:**

**Current Mailing Address:**

4320 19TH AVE. S.W.  
NAPLES, FL 34116 US

**New Mailing Address:**

FEI Number: 01-0648535      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SPL INCOME TAX CORP  
6006 RADIO RD  
NAPLES, FL 34104 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: P  
Name: CARTAGENA, ADALBERTO  
Address: 4320. 19TH AVE. S.W  
City-St-Zip: NAPLES, FL 34116

Title: VP  
Name: CARTAGENA, CARMEN  
Address: 4320. 19TH AVE. S.W  
City-St-Zip: NAPLES, FL 34116

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: ADALBERTO CARTAGENA

P

04/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date