

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000016355

FILED
Apr 24, 2011
Secretary of State

Entity Name: PROFESSIONAL MEDICAL REPAIR, INC.

Current Principal Place of Business:

10030 EW PAPPY RD
UNIT #3101
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

450-106 STATE RD 13 N.
SUITE 148
JACKSONVILLE, FL 32259

New Mailing Address:

450-106 STATE RD 13 N.
#148
JACKSONVILLE, FL 32259

FEI Number: 59-3764626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOIGT, ROBERT C
450-106 STATE RD 13 N.
SUITE 148
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

VOIGT, ROBERT C
450-106 STATE RD 13 N.
#148
JACKSONVILLE, FL 32259 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:

Electronic Signature of Registered Agent

04/24/2011

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: VOIGT, ROBERT C
Address: 450-106 STATE RD 13 N. , #148
City-St-Zip: JACKSONVILLE, FL 32259

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: ROBERT VOIGT

PRES

04/24/2011

Electronic Signature of Signing Officer or Director

Date