

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000087426

FILED  
Jan 04, 2012  
Secretary of State

**Entity Name:** ELECTRONIC MEDICAL INTERPRETATION, INC

**Current Principal Place of Business:**

1314 FLORIDA AVE  
FORT MYERS, FL 33901 US

**New Principal Place of Business:**

2030 WEST FIRST ST  
E  
FORT MYERS, FL 33901 US

**Current Mailing Address:**

1314 FLORIDA AVE  
FORT MYERS, FL 33901 US

**New Mailing Address:**

1625 NILES RD  
SUMMERLAND KEY, FL 33042 US

**FEI Number:** 41-2106482

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WASHECKA, ED  
8851 NW 21ST COURT  
CORAL SPRINGS, FL 33071 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: LEANDO, PETER DR.  
Address: 1625 NILES RD  
City-St-Zip: SUMMERLAND KEY, FL 33042 US

Title: VP  
Name: LEANDO, REBECCA R DR.  
Address: 1625 NILES RD  
City-St-Zip: SUMMERLAND KEY, FL 33042 US

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: DR REBECCA R LEANDO

VP

01/04/2012

Electronic Signature of Signing Officer or Director

Date