2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092007

Entity Name: TRAUMATIC MEDICAL SERVICES, INC.

FILED Mar 17, 2011 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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5518 WEST FLAGLER STREET MIAMI, FL 33134 US

Current Mailing Address: New Mailing Address:

5518 WEST FLAGLER STREET MIAMI, FL 33134 US

FEI Number: 20-1248460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MIRANDA, GERARDO 9110 FOUNTAINEBLEAU BLVD. #505 MIAMI, FL 33172 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 Date

OFFICERS AND DIRECTORS:

Title: PS

Name: MIRANDA, GERARDO

Address: 9110 FOUNTAINEBLEAU BLVD. #505

City-St-Zip: MIAMI, FL 33172 US

Title: VP

Name: MIRABAL, SALVADOR C Address: 5518 WEST FLAGLER ST. City-St-Zip: MIAMI, FL 33134 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: GERARDO MIRANDA PRES 03/17/2011