

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000001221

Entity Name: MEDIC, INFUSION, P.A.

FILED
Feb 01, 2012
Secretary of State

Current Principal Place of Business:

2525 HARBOR BOULEVARD
SUITE 201-B
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

3191 HARBOR BLVD
UNIT D
PORT CHARLOTTE, FL 33952

Current Mailing Address:

2525 HARBOR BOULEVARD
SUITE 201-B
PORT CHARLOTTE, FL 33952

New Mailing Address:

3191 HARBOR BLVD
UNIT D
PORT CHARLOTTE, FL 33952

FEI Number: 20-2094100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METKY, MICHAEL R
246 E TARPON BLVD
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

METKY, MICHAEL R
3248 VILLAGE LANE
PORT CHARLOTTE, FL 33953 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: MICHAEL R. METYK D.P.M.

02/01/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: METYK, MICHAEL
Address: 3248 VILLAGE LANE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: S
Name: METYK, MICHAEL
Address: 3191 HARBOR BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

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: MICHAEL R. METYK D.P.M.

P

02/01/2012

Electronic Signature of Signing Officer or Director

Date