

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000031998

Entity Name: CTC MED SOLUTIONS, INC.

FILED
May 02, 2008
Secretary of State

Current Principal Place of Business:

5150 SW 48 WAY
#602
DAVIE, FL 33314

New Principal Place of Business:

4960 SW 52ND ST
#412
DAVIE, FL 33314

Current Mailing Address:

5150 SW 48 WAY
#602
DAVIE, FL 33314

New Mailing Address:

4960 SW 52ND ST
#412
DAVIE, FL 33314

FEI Number: 20-4410159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHEDRIN, DIANA
5150 SW 48 WAY
#602
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

SCHEDRIN, DIANA
4960 SW 52ND ST
#412
DAVIE, FL 33314 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: DIANA SCHEDRIN

05/02/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SCHEDRIN, DIANA
Address: 5150 SW 48 WAY #602
City-St-Zip: DAVIE, FL 33314

Title: P () Delete
Name: SCHEDRIN, VLADISLAV V
Address: 5150 SW 48 WAY #602
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: SCHEDRIN, VLADISLAV V
Address: 4960 SW 52ND ST #412
City-St-Zip: DAVIE, FL 33314

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DIANA SCHEDRIN

P

05/02/2008

Electronic Signature of Signing Officer or Director

Date