

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000062511

FILED
Mar 02, 2011
Secretary of State

Entity Name: MEDICAL CABLE SOLUTIONS INC

Current Principal Place of Business:

19239 NORTH DALE MABRY HWY
STE 157
LUTZ, FL 33548 US

New Principal Place of Business:

Current Mailing Address:

19239 NORTH DALE MABRY HWY
STE 157
LUTZ, FL 33548

New Mailing Address:

19239 NORTH DALE MABRY HWY
STE 157
LUTZ, FL 33548 US

FEI Number: 20-4842252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, KAY L PRES
19239 NORTH DALE MABRY HWY - STE. 157
STE. 157
LUTZ, FL 33548 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: DIR
Name: CLARK, KAY L DIR
Address: 19239 NORTH DALE MABRY HWY
City-St-Zip: LUTZ, FL 33548 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: KAY L CLARK

DIR

03/02/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date