

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102535

Entity Name: LEGACY MEDICAL SERVICES , INC.

FILED
Jun 20, 2008
Secretary of State

Current Principal Place of Business:

649 US HWY 1
SUITE 2
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

5216 MISTY MORN ROAD
PALM BEACH GARDENS, FL 33418

New Mailing Address:

649 US HWY 1
SUITE 2
NORTH PALM BEACH, FL 33408

FEI Number: 26-2842109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAH, SHEELA R
5216 MISTY MORN ROAD
PALM BEACH GARDENS, FL 33418 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

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: P,S () Delete
Name: SHAH, SHEELA
Address: 5216 MISTY MORN RD
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP,T () Delete
Name: DELTOR, PIERRE
Address: 13527 49TH STREET NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: SHEELA SHAH

P

06/20/2008

Electronic Signature of Signing Officer or Director

Date