

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000075954

Entity Name: MEDS ON CALL, INC

FILED  
Apr 27, 2011  
Secretary of State

## Current Principal Place of Business:

3208 E. COLONIAL DRIVE  
SUITE 179  
ORLANDO, FL 32803

## New Principal Place of Business:

12864 BISCAYNE BLVD  
SUITE 104  
NORTH MIAMI, FL 33181

## Current Mailing Address:

3208 E. COLONIAL DRIVE  
SUITE 179  
ORLANDO, FL 32803

## New Mailing Address:

12864 BISCAYNE BLVD  
SUITE 104  
NORTH MIAMI, FL 33181

FEI Number: 27-2267377

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KIRKWOOD, LEAH D  
3208 E. COLONIAL DRIVE  
SUITE 179  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

KIRKWOOD, LEAH D  
12864 BISCAYNE BLVD  
SUITE 104  
NORTH MIAMI, FL 33181 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: LEAH D. KIRKWOOD

04/27/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PRES  
Name: KIRKWOOD, LEAH D  
Address: 12864 BISCAYNE BLVD SUITE 104  
City-St-Zip: NORTH MIAMI, FL 33181

Title: SEC  
Name: KIRKWOOD, VIVIAN M  
Address: 12864 BISCAYNE BLVD SUITE 104  
City-St-Zip: NORTH MIAMI, FL 33181

Title: CFO  
Name: AWOYEMI, JAIYE O  
Address: 12864 BISCAYNE BLVD SUITE 104  
City-St-Zip: NORTH MIAMI, FL 33181

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: LEAH D. KIRKWOOD

PRES

04/27/2011

Electronic Signature of Signing Officer or Director

Date