2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000087503

Entity Name: DASMEDICAL CONNECTIONS, INC

Apr 22, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8280 NW 27 TH STREET 10535 BLUE PALM STREET

PLANTATION, FL 33324 518 DORAL, FL 33122

New Mailing Address: Current Mailing Address:

8280 NW 27 TH STREET 10535 BLUE PALM STREET US

PLANTATION, FL 33324 DORAL, FL 33122 US

FEI Number: 26-3988616 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FAERMAN, RICARDO A FAERMAN, RICARDO A 10535 BLUE PALM STREET 8280 NW 27 TH STREET PLANTATION, FL 33324

MIAMI, FL 33122 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: 04/22/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

FAERMAN, RICARDO A CEBS Name: 10535 BLUE PALM STREET Address: City-St-Zip: PLANTATION, FL 33324 US

Title: MRS

Name: MARIA, MAGNERES J 10535 BLUE PALM STREET Address: PLANTATION, FL 33324 US City-St-Zip:

Title: MR

ALIJAS, GUILLERMO E Name: MONTEVIDEO 431 Address:

City-St-Zip: BUENOS AIRES, OT 1019 AR

Title:

GARCIA ZANUDIO, PAULA Name:

4302 BOULEVARD ADOLFO RUIZ CORTINES Address:

City-St-Zip: MEXICO, OT 04500 ME

Title:

Name: HOTH, GERARDO

Address: 4302 BOULEVARD ADOLFO RUIZ CORTINES

City-St-Zip: MEXICO, OT 04500 ME

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.

Ρ SIGNATURE: FAERMAN RICARDO A. 04/22/2012