

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000026757

**FILED**  
**Jun 04, 2012**  
**Secretary of State**

**Entity Name:** MEDSTAR SOLUTIONS INC

**Current Principal Place of Business:**

1815 GRIFFIN ROAD  
201  
DANIA BEACH, FL 33004-225 UN

**New Principal Place of Business:**

**Current Mailing Address:**

1815 GRIFFIN ROAD  
201  
DANIA BEACH, FL 33004-225

**New Mailing Address:**

**FEI Number:** 20-1907539

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

VALLS, EMILIO  
3700 GALT OCEAN DRIVE  
FORT LAUDERDALE, FL 33309 US

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

VALLS, EMILIO  
2500 E LAS OLAS BLVD # 304  
FORT LAUDERDALE, FL 33301 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

06/04/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: EMILIO, VALLS  
Address: 1815 GRIFFIN ROAD SUITE 201  
City-St-Zip: DANIA BEACH, FL 33004

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: EMILIO VALLS

PRES

06/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date