

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000070527

FILED  
Feb 01, 2010  
Secretary of State

Entity Name: CAG MEDICAL SERVICES, INC.

## Current Principal Place of Business:

1415 MARIPOSA CIRCLE  
204  
NAPLES, FL 34105

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 112084  
NAPLES, FL 34108 US

## New Mailing Address:

FEI Number: 27-0846096

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREENBERG, CLIFFORD A  
1415 MARIPOSA CIRCLE  
204  
NAPLES, FL 34105 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P,S,  
Name: GREENBERG, CLIFFORD A  
Address: PO BOX 112084  
City-St-Zip: NAPLES,, FL 34108 US

Title: D  
Name: GREENBERG, CLIFFORD A  
Address: PO BOX 112084  
City-St-Zip: NAPLES, FL 34108 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: CLIFFORD A. GREENBERG

P/D

02/01/2010

Electronic Signature of Signing Officer or Director

Date