

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000039545

FILED
Aug 09, 2011
Secretary of State

Entity Name: SCIENCE MEDICAL NN CORP.

Current Principal Place of Business:

3400 NE 192 ST MYSTIC POINTE TOWER 600
UNIT 406
MIAMI, FL 33180

New Principal Place of Business:

7950 NW 53RD STREET
215
MIAMI, FL 33166

Current Mailing Address:

3400 NE 192 ST MYSTIC POINTE TOWER 600
UNIT 406
MIAMI, FL 33180

New Mailing Address:

7950 NW 53RD STREET
215
MIAMI, FL 33166

FEI Number: 42-1771319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMOS TOLLINCHI, ALFREDO J
3400 NE 192 ST MYSTIC POINTE TOWER 600
UNIT 406
MIAMI, FL 33180 US

Name and Address of New Registered Agent:

RAMOS TOLLINCHI, ALFREDO J
7950 NW 53RD STREET
215
MIAMI, FL 33166 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: ALFREDO RAMOS

08/09/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: RAMOS TOLLINCHI, ALFREDO J
Address: 7950 NW 53RD STREET STE 215
City-St-Zip: MIAMI, FL 33166

Title: DP
Name: RAMOS TOLLINCHI, JESUS A
Address: 7950 NW 53RD STREET STE 215
City-St-Zip: MIAMI, FL 33166

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: ALFREDO RAMOS

DP

08/09/2011

Electronic Signature of Signing Officer or Director

Date