

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000041871

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Entity Name:** REGAL MEDICAL SOLUTIONS COMPANY INC

**Current Principal Place of Business:**

1407 SAN MARCO AVE  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

600 SW 31 AVE  
MIAMI, FL 33135 US

**Current Mailing Address:**

1407 SAN MARCO AVE  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

901 COUNTRY CLUB PRADO  
CORAL GABLES, FL 33134 US

FEI Number: 27-2583218

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JIMENEZ, MARGARITA  
1407 SAN MARCO AVE  
CORAL GABLES, FL 33134 US

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

JIMENEZ, MARGARITA  
901 COUNTRY CLUB PRADO  
CORAL GABLES, FL 33134 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

02/17/2012

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: JIMENEZ, MARGARITA  
Address: 901 COUNTRY CLUB PRADO  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: P  
Name: PEREZ, JUANCARLOS  
Address: 901 COUNTRY CLUB PRADO  
City-St-Zip: CORAL GABLES, FL 33134 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: JUANCARLOS PEREZ

Electronic Signature of Signing Officer or Director

P

02/17/2012

Date