

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000048591

FILED
Mar 25, 2011
Secretary of State

Entity Name: BIOMEDICAL SOLUTIONS OF THE AMERICAS, INC.

Current Principal Place of Business:

2799 NW 2ND AVE., SUITE 118
BOCA RATON, FL 33431

New Principal Place of Business:

2799 NW 2ND AVE.
SUITE 118
BOCA RATON, FL 33431

Current Mailing Address:

2799 NW 2ND AVE., SUITE 118
BOCA RATON, FL 33431

New Mailing Address:

2799 NW 2ND AVE.
SUITE 118P
BOCA RATON, FL 33431

FEI Number: 27-2836027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEACON, GEORGE M
4486 WOODFIELD BLVD.
BOCA RATON, FL 33434 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

OFFICERS AND DIRECTORS:

Title: PD
Name: DEACON, GEORGE M
Address: 4486 WOODFIELD BLVD.
City-St-Zip: BOCA RATON, FL 33434

Title: VD
Name: DEACON, VICKY A
Address: 4486 WOODFIELD BLVD.
City-St-Zip: BOCA RATON, FL 33434

Title: STD
Name: DEACON, G. MICHAEL
Address: 7621 LADSON TER.
City-St-Zip: LAKE WORTH, FL 33467

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: GEORGE M DEACON

PD

03/25/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date