

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000059911

FILED
Jan 20, 2011
Secretary of State

Entity Name: CLINICAL SOLUTIONS MEDICAL TRAINING INC

Current Principal Place of Business:

2860 STATE ROAD 84, SUITE
116-212
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

2800 STATE ROAD 84
SUITE 103
FORT LAUDERDALE, FL 33312

Current Mailing Address:

2860 STATE ROAD 84
116-212
FORT LAUDERDALE, FL 33312

New Mailing Address:

2800 STATE ROAD 84
SUITE 103
FORT LAUDERDALE, FL 33312

FEI Number: 27-3074862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PIDGEON, KRISTOPHER G
1020 NORTH 18TH COURT
201
HOLLYWOOD, FL 33020 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: D
Name: PIDGEON, KRISTOPHER G
Address: 1020 NORTH 18TH COURT
City-St-Zip: HOLLYWOOD, FL 33020

Title: D
Name: PACHECO, JESUS
Address: 1844 NW 109TH AVENUE
City-St-Zip: PLANTATION, FL 33322

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: KRISTOPHER PIDGEON

D

01/20/2011

Electronic Signature of Signing Officer or Director

Date