## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000095968

Entity Name: IDEAL MED SOLUTIONS, INC.

FILED Jul 13, 2011 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2855 SOUTH ATLANTIC AVENUE #404

DAYTONA BEACH, FL 32118

Current Mailing Address: New Mailing Address:

2855 SOUTH ATLANTIC AVENUE #404 DAYTONA BEACH, FL 32118

FEI Number: 27-4165969 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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 Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: BROWN, NEIL M

Address: 2855 SOUTH ATLANTIC AVENUE, #404

City-St-Zip: DAYTONA BEACH, FL 32118

Title: VPST

Name: ANTOS, JAMES C

Address: 2855 SOUTH ATLANTIC AVENUE, #404

City-St-Zip: DAYTONA BEACH, FL 32118

Title: D

Name: ANTOS, JAMES C

Address: 2855 SOUTH ATLANTIC AVENUE, #404

City-St-Zip: DAYTONA BEACH, FL 32118

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: NEIL BROWN PD 07/13/2011