## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000097594

Entity Name: MED-A-FIX GLOBAL, INC.

FILED Apr 28, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7777 NORMANDY BLVD #523 JACKASONVILLE, FL 32221

Current Mailing Address: New Mailing Address:

7777 NORMANDY BLVD #523 JACKASONVILLE, FL 32221

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

MCCALL, CONNIE A
7777 NORMANDY BLVD #523
JACKASONVILLE, FL 32221 US
MCCALL, ANN C
7777 NORMANDY BLVD #523
JACKASONVILLE, FL 32221 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: ANN C. MCCALL 04/28/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: MCCALL, ANN C

Address: 7777 NORMANDY BLVD #523 City-St-Zip: JACKASONVILLE, FL 32221

Title: SCFO

Name: KAVIANY, REBECCA J Address: 279 DEEPRIDGE COURT City-St-Zip: ORANGE PARK, FL 32065

Title: VP

 Name:
 MCCLOUD, RODERICK

 Address:
 5055 DOSTIE DR S

 City-St-Zip:
 JACKSONVILLE, FL 32209

Title: [

Name: NIELDS, WILL Address: 221 E 7TH ST

City-St-Zip: JACKSONVILLE, FL 32206

Title:

 Name:
 HARPER, TOM

 Address:
 4156 VENETIA BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: CFO

 Name:
 ZAPPA, PARALEE

 Address:
 12 AVISTA CIRCLE

 City-St-Zip:
 ST. AUGUSTINE, FL 32080

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: ANN C. MCCALL P 04/28/2011