

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000032697

Entity Name: QB MEDIC, INC.

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

425 S STATE ROAD 7  
HOLLYWOOD, FL 33023

**New Principal Place of Business:**

4618 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

425 S STATE ROAD 7  
HOLLYWOOD, FL 33023

**New Mailing Address:**

4618 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33021

FEI Number: 45-1440863

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCOTT, DAMIEN S  
417 SE 14TH COURT  
1  
FORT LAUDERDALE, FL 33316 US

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

LOZADA, DARWIN  
4618 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33021 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: DARWIN LOZADA

05/01/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LOZADA, DARWIN  
Address: 4437 LAUREL PLACE  
City-St-Zip: WESTON, FL 33332 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: DARWIN LOZADA

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date