2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000101671

Entity Name: TEC MED DE VENEZUELA C.A. INC

FILED Apr 17, 2012 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|---|----------------------------------|------------------------------------|---|--|
| 8647 NW 113TH CT DORAL, FL 33178 | | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 8647 NW 113TH CT DORAL, FL 33178 | | | | |
| FEI Number: 45-3942057 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of | Name and Address of New Registered Agent: | |
| BAHSSAS-MAZZ, JOSEF 8647 NW 113TH CT DORAL, FL 33178 US | | | | |
| The above named entity s in the State of Florida. | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | |
| Electronic Signature of Registered Agent | | ent | Date | |
| | | | | |
| OFFICERS AND DIRECT | TORS: | | | |
| Title: D | | | | |

BAHSSAS-MAAZ, JOSEF Name: 8647 WN 113TH CT Address: City-St-Zip: DORAL, FL 33178

VΡ Title:

BAHSAS, ADEL Name: 8647 WN 113TH CT Address: DORAL, FL 33178 City-St-Zip:

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: JOSEF BAHSSAS Ρ 04/17/2012