2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2012
Secretary of State

DOCUMENT# P11000109175

Entity Name: LESIONLOC INC.

Current Principal Place of Business:

5850 SOUTH PINE ISLAND ROAD
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

5850 SOUTH PINE ISLAND ROAD
DAVIE, FL 33328

New Mailing Address:

FEI Number: 45-4379889 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAPP, MICHAEL
5850 SOUTH PINE ISLAND ROAD
DAVIE, FL 33328 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: P
Name: DAGHIGHIAN, FARHAD
Address: 2714 ARIZONA AVENUE
City-St-Zip: SANTA MONICA, CA 90404

Title: S
Name: LEON, BARRY JAY
Address: 326 LINDEN PLACE
City-St-Zip: WEST HEMPSTEAD, NY 11552

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: BARRY LEON PRES 05/01/2012

Electronic Signature of Signing Officer or Director Date