CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 27 PM 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300001457383

DO NOT WRITE IN THIS SPACE

1. Corporation Name

EMed Systems Corporation

DOCUMENT #

P94000029592

Mailing Address / Principal Place of Business

2301 Lucien Way
Suite 200
Maitland, Florida 32751

If above addresses are incorrect in any way, give through incorrect information and enter correction below

2. Mailing Address 21	**2a.** Principal Place of Business 26	**3.** Date Incorporated or Qualified: 4-14-95	**3a.** Date of Last Report: N/A
Suite, Apt. # etc. 22	Suite, Apt. # etc. 27	**4.** FEI Number: 59-3253130	Applied For ☐ Not Applicable ☐
City & State 23	City & State 28	**5.** Certificate of Status Desired $8.75 ☐	**6.** Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
Zip 24 / Country 25	Zip 29 / Country 30	**7.** Nonprofit Exempt from $138.75 Supplemental Fee ☐	**8.** This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes XX No

9. Name and Address of Current Registered Agent

David S. Greenberg
2144 Venetian Way
Winter Park, Florida 32789

10. Name and Address of New Registered Agent

81 Name: Thaddeus Seymour, Jr.
82 Street Address (P.O. Box Number is Not Acceptable): 2301 Lucien Way
83: Suite 200
84 City: Maitland **FL** 85 Zip Code: 32751

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE: Thaddeus Seymour, Jr. DATE: 4/26/95
Required Agent Accepting Appointment; DATE Required; Agent signature required when changing

12. OFFICERS AND DIRECTORS		**13.** CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	D,P	11 TITLE	
12 NAME	David S. Greenberg	12 NAME	
13 STREET ADDRESS	2144 Venetian Way	13 STREET ADDRESS	
14 CITY-ST-ZIP	Winter Park, Florida 32789	14 CITY-ST-ZIP	
21 TITLE	~~D,V~~	21 TITLE	D,S
22 NAME	~~David Ramos, Jr.~~	22 NAME	David Ramos, Jr.
23 STREET ADDRESS	~~3321 Hamlet Loop~~	23 STREET ADDRESS	3321 Hamlet Loop
24 CITY-ST-ZIP	~~Winter Park, Florida 32792~~	24 CITY-ST-ZIP	Winter Park, Florida 32792
31 TITLE	~~D,S,T~~	31 TITLE	D,T
32 NAME	~~Ana R. Telleria~~	32 NAME	Ana R. Telleria
33 STREET ADDRESS	~~7604 Waunagua Drive~~	33 STREET ADDRESS	7604 Waunagua Drive
34 CITY-ST-ZIP	~~Winter Park, Florida 32792~~	34 CITY-ST-ZIP	Winter Park, Florida 32792
41 TITLE		41 TITLE	D,V
42 NAME		42 NAME	Thaddeus Seymour, Jr.
43 STREET ADDRESS		43 STREET ADDRESS	2301 Lucien Way, Suite 200
44 CITY-ST-ZIP		44 CITY-ST-ZIP	Maitland, Florida 32751
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY-ST-ZIP		54 CITY-ST-ZIP	
61 TITLE		61 TITLE	
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY-ST-ZIP		64 CITY-ST-ZIP	

4/27

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Thaddeus Seymour, Jr. 4/26/95 407-875-6972
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Title Daytime Phone #