

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000046475

**FILED**  
**Jan 10, 2010**  
**Secretary of State**

**Entity Name:** ELECTROSTIM MEDICAL SERVICES, INC.

**Current Principal Place of Business:**

3504 CRAGMONT DR SUITE 100  
TAMPA, FL 33619 US

**New Principal Place of Business:**

**Current Mailing Address:**

3504 CRAGMONT DR SUITE 100  
TAMPA, FL 33619 US

**New Mailing Address:**

**FEI Number:** 59-3323767

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARCIA, MARIO JR  
1001 KINGSBOROUGH GARDENS CT.  
TAMPA, FL 33549 US

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

GARCIA, MARIO JR  
628 BALIBAY RD.  
APOLLO BEACH, FL 33572 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: MARIO GARCIA JR.

01/10/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GARCIA, MARIO JR  
Address: 628 BALIBAY RD.  
City-St-Zip: APOLLO BEACH, FL 33572

Title: VP  
Name: GARCIA, IVIS  
Address: 628 BALIBAY RD.  
City-St-Zip: APOLLO BEACH, FL 33572

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: MARIO GARCIA JR.

P

01/10/2010

Electronic Signature of Signing Officer or Director

Date