

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000020336

FILED
May 01, 2011
Secretary of State

Entity Name: KEYSTAR MEDICAL TRAINING INC

Current Principal Place of Business:

6295 LAKE WORTH ROAD
SUITE 20 AND 21
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

6295 LAKE WORTH ROAD
SUITE 20 AND 21
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 27-2057868 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VOLCY, ALEX
1212 JACKPINE STREET
WELLINGTON, FL 33414 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: VOLCY, ALEX
Address: 1212 JACKPINE STREET
City-St-Zip: WELLINGTON, FL 33414

Title: VP
Name: BENJAMIN, LUDERSNA
Address: 1359 ROSETTA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33411

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: ALEX VOLCY

_____ Electronic Signature of Signing Officer or Director

P

05/01/2011

_____ Date