

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000005680

Entity Name: REEF MEDICS, INC

Current Principal Place of Business:

27215 CROSBY RD
MYAKKA CITY, FL 34251

Current Mailing Address:

PO BOX 110652
LAKEWOOD RANCH, FL 34211 US

FEI Number: 47-4154381

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARTER, WESLEY
27215 CROSBY RD
MYAKKA CITY, FL 34251 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DT
Name CARTER, WESLEY
Address 27215 CROSBY RD
City-State-Zip: MYAKKA CITY FL 34251

Title DP
Name AUSTIN, ERIC
Address 3301 SHAMROCK DRIVE
City-State-Zip: VENICE FL 34293

Title DS
Name CARTER, KERRI
Address 27215 CROSBY RD
City-State-Zip: MYAKKA CITY FL 34251

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WESLEY CARTER

DIRECTOR

01/11/2017

Electronic Signature of Signing Officer/Director Detail

Date