

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000050578

Entity Name: POLMED PA

Current Principal Place of Business:

1803 BRIAR CREEK BLVD
SAFETY HARBOR, FL 34695

Current Mailing Address:

P.O. BOX 1289
BRANDON, FL 33504 US

FEI Number: 59-3717236

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KASZUBA, ROBERT
1770 LAGO VISTA BLVD
PALM HARBOR, FL 34685 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 PD
Name KASZUBA, ROBERT
Address 1770 LAGO VISTA BLVD
City-State-Zip: PALM HARBOR FL 34685

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: ROBERT KASZUBA

MD

04/22/2017

Electronic Signature of Signing Officer/Director Detail

Date