## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000024698

Entity Name: JASPER MEDICAL, INC.

**Current Principal Place of Business:** 

1183 CEDAR FALLS DRIVE WESTON, FL 33327

**Current Mailing Address:** 

1183 CEDAR FALLS DRIVE WESTON, FL 33327

FEI Number: 26-2539739 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PERKINS, JOHN 1183 CEDAR FALLS DRIVE WESTON, FL 33327 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

FILED Apr 30, 2015

**Secretary of State** 

CC3011726876

## Officer/Director Detail:

Title MR.

Name PERKINS, JOHN

Address 1183 CEDAR FALLS DRIVE

City-State-Zip: WESTON FL 33327

SIGNATURE: JOHN PERKINS

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.