

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000096954

Entity Name: ZAIR MEDICAL SERVICE INC

Current Principal Place of Business:

1990 SW 1 STREET
SUITE 202
MIAMI, FL 33135

Current Mailing Address:

1990 SW 1 STREET
SUITE 202
MIAMI, FL 33135

FEI Number: 80-0291151

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AQUINO, LUIS R
1990 SW 1 STREET
SUITE 202
MIAMI, FL 33135 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 P
Name AQUINO, LUIS R
Address 1990 SW 1 STREET #202
City-State-Zip: MIAMI FL 33135

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: LUIS AQUINO

PRESIDENT

06/06/2014

Electronic Signature of Signing Officer/Director Detail

Date