

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000108034

Entity Name: CRISTIA MEDICAL SUPPLY, INC.

Current Principal Place of Business:

6099 EATON ST
WEST PALM BEACH, FL 33411

Current Mailing Address:

6099 EATON ST
WEST PALM BEACH, FL 33411 US

FEI Number: 36-4645337

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRISTIA, CRISTOPHER C
6099 EATON ST
WEST PALM BEACH, FL 33411 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 D
Name CRISTIA, CRISTOPHER C
Address 6099 EATON ST
City-State-Zip: WEST PALM BEACH FL 33411

Title P
Name CRISTIA, CRISTOPHER C
Address 6099 EATON ST
City-State-Zip: WEST PALM BEACH FL 33411

Title VP
Name CRISTIA, CRISTOPHER C
Address 6099 EATON ST
City-State-Zip: WEST PALM BEACH FL 33411

Title T
Name CRISTIA, CRISTOPHER C
Address 6099 EATON ST
City-State-Zip: WEST PALM BEACH FL 33411

Title S
Name CRISTIA, CRISTOPHER C
Address 6099 EATON ST
City-State-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: CRISTOPHER CRISTIA

PRESIDENT

03/20/2015

Electronic Signature of Signing Officer/Director Detail

Date