

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000046617

Entity Name: JCM MEDICAL SERVICES INC

Current Principal Place of Business:

87 EAST 49TH STREET
HIALEAH, FL 33013

Current Mailing Address:

87 EAST 49TH STREET
HIALEAH, FL 33013 US

FEI Number: 80-0602200

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAROL, JUAN CMD
591 NW 125TH AVE
MIAMI, FL 33182 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	Title	VP
Name	SAROL, JUAN CMD	Name	ROCHER, MARAY MD
Address	591 NW 125TH AVE	Address	591 NW 125TH AVE
City-State-Zip:	MIAMI FL 33182	City-State-Zip:	MIAMI FL 33182

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: JUAN C SAROL MD

PRESIDENT

04/26/2013

Electronic Signature of Signing Officer/Director Detail

Date