

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000035148

Entity Name: CLIN MED ENTERPRISES, INC

Current Principal Place of Business:

10244 CYPRESS LAKES PRESERVE DR
LAKE WORTH, FL 33449

Current Mailing Address:

10244 CYPRESS LAKES PRESERVE DR
LAKE WORTH, FL 33449

FEI Number: 45-1697392

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GODDEN, CHARMAINE
10244 CYPRESS LAKES PRESERVE DR
LAKE WORTH, FL 33449 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 GODDEN, CHARMAINE
Address 10244 CYPRESS LAKES PRESERVE
DR
City-State-Zip: LAKE WORTH FL 33449

Title VPD
Name NORIEGA, KIMIAM V. F
Address 10244 CYPRESS LAKE PRESERVE DR
City-State-Zip: LAKE WORTH FL 33449

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: CHARMAINE GODDEN

PRESIDENT

03/29/2013

Electronic Signature of Signing Officer/Director Detail

Date