#### 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000073711

Entity Name: PORT MEDICAL PRODUCTS, INC.

# **Current Principal Place of Business:**

COMFORT ZONE 1474 W. GRENADA BLVD SUITE 475 ORMOND BEACH, FL 32174

# **Current Mailing Address:**

POST OFFICE BOX 290625 PORT ORANGE, FL 32129

FEI Number: 45-3771986 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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** Jan 25, 2016

**Secretary of State** 

CC0743710091

# Officer/Director Detail:

Title

SALTSBERG, ERIC Name

POST OFFICE BOX 290625 Address City-State-Zip: PORT ORANGE FL 32129

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.

Electronic Signature of Signing Officer/Director Detail