

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000082274

Entity Name: KRAUSE INTEGRATIVE MEDICINE, INC.

Current Principal Place of Business:

1700 N DIXIE HWY
127
BOCA RATON, FL 33432

Current Mailing Address:

PO BOX 272421
BOCA RATON, FL 33427 US

FEI Number: 46-1091243

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRAUSE, GARRETT E
MIZNER CITY CENTER
1700 N. FEDERAL HWY. STE #127
BOCA RATON, FL 33432 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 KRAUSE, GARRETT E
Address 1700 N DIXIE HWY
127
City-State-Zip: BOCA RATON FL 33432

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: GARRETT KRAUSE

REGISTERED AGENT

03/01/2013

Electronic Signature of Signing Officer/Director Detail

Date