

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000069686

Entity Name: ELITE MEDICAL GROUP, INC.

Current Principal Place of Business:

820 SHADOW BAY WAY
OSPREY, FL 34229

Current Mailing Address:

P.O. BOX 279
VENICE, FL 34285 US

FEI Number: 80-0949549

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREENBERG, STUART N
820 SHADOW BAY WAY
OSPREY, FL 34229 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 GREENBERG, STUART N
Address 820 SHADOW BAY WAY
City-State-Zip: OSPREY FL 34229

Title VP
Name KAMAL, AHSAN
Address 820 SHADOW BAY WAY
City-State-Zip: OSPREY FL 34229

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: STUART GREENBERG

PRESIDENT

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date