

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000098043

Entity Name: MCI-MEDICAL CONCEPT INNOVATION INC

Current Principal Place of Business:

4592 NORTH HIATUS ROAD
SUITE 4592
SUNRISE, FL 33351

Current Mailing Address:

4592 NORTH HIATUS ROAD
SUITE 4592
SUNRISE, FL 33351 US

FEI Number: 47-2481164

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEVOEIRO DEMARCHI, JOSE A
4592 NORTH HIATUS ROAD
SUITE 4592
SUNRISE, FL 33351 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: JOSE A NEVOEIRO DEMARCHI

03/24/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name NEVOEIRO DEMARCHI, JOSE A
Address 4592 NORTH HIATUS ROAD
SUITE 4592
City-State-Zip: SUNRISE FL 33351

Title VP
Name CARITA, PAULO E
Address 4592 NORTH HIATUS ROAD
SUITE 4592
City-State-Zip: SUNRISE FL 33351

Title TREASURER
Name CARITA, CESAR
Address 4592 NORTH HIATUS ROAD
SUITE 4592
City-State-Zip: SUNRISE FL 33351

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: JOSE A NEVOEIRO DEMARCHI

PD

03/24/2020

Electronic Signature of Signing Officer/Director Detail

Date