2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2019
Secretary of State
5680072348CC

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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:

RUIZ, NADIN
12555 ORANGE DRIVE
SUITE 216
DAVIE, FL 33330 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	Title	VP
Name	NEVOEIRO DEMARCHI, JOSE A	Name	CARITA, PAULO E
Address	4592 NORTH HIATUS ROAD SUITE 4592	Address	4592 NORTH HIATUS ROAD SUITE 4592
City-State-Zip:	SUNRISE FL 33351	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 04/12/2019

Electronic Signature of Signing Officer/Director Detail — Date