

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000058925

Entity Name: LEMARE MEDICAL, INC.

Current Principal Place of Business:

2333 BRICKELL AVE, 1101
MIAMI, FL 33129

Current Mailing Address:

2333 BRICKELL AVE, 1101
MIAMI, FL 33129 US

FEI Number: 11-3172679

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOMBERG, NORMAN
7700 NORTH KENDALL DRIVE
SUITE 610
MIAMI, FL 33156 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 ESTAY, JULIO E
Address 2333 BRICKELL AVE, 1101
City-State-Zip: MIAMI FL 33129

Title S
Name ESTAY, GRETA
Address 2333 BRICKELL AVE, APT 1101
City-State-Zip: MIAMI FL 33129

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: JULIO ESTAY

PRESIDENT

01/16/2013

Electronic Signature of Signing Officer/Director Detail

Date