

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000087081

Entity Name: LE JEUNE MEDICAL SERVICES, INC.

Current Principal Place of Business:

701 NW 57 AVE
SUITE 240
MIAMI, FL 33126

Current Mailing Address:

701 NW 57 AVE
SUITE 240
MIAMI, FL 33126 US

FEI Number: 65-0705230

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LORENZO, EMILIO M
701 NW 57 AVE
SUITE 240
MIAMI, FL 33126 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 DPST
Name LORENZO, EMILIO M
Address 701 NW 57 AVE
SUITE 240
City-State-Zip: MIAMI FL 33126

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: EMILIO M. LORENZO

PRESIDENT

03/24/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date