## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000072301

Entity Name: DATA MEDICAL SOLUTIONS, INC.

**Current Principal Place of Business:** 

887 ADDISON DRIVE N.E. SAINT PETERSBURG. FL 33716

**Current Mailing Address:** 

PO BOX 20741

SAINT PETERSBURG, FL 33742 US

FEI Number: 65-0776266 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARY F MELIN 887 ADDISON DRIVE N.E. SAINT PETERSBURG, FL 33716 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

FILED Jan 18, 2013

**Secretary of State** 

CC5862841296

Officer/Director Detail:

SIGNATURE: MARY MELIN

Title DP Title VP

Name MARY F MELIN Name MELIN, CHARLES E
Address PO BOX 20741 Address PO BOX 20741

City-State-Zip: SAINT PETERSBURG FL 33742 City-State-Zip: SAINT PETERSBURG FL 33742

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.

**PRESIDENT**