

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000083488

Entity Name: IMS MEDICAL SYSTEMS, INC.

Current Principal Place of Business:

4817 NW 67TH ST
GAINESVILLE, FL 32653

Current Mailing Address:

4817 NW 67TH ST
GAINESVILLE, FL 32653

FEI Number: 59-3481575

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARVESU, ANTONIO F
4817 NW 67TH ST
GAINESVILLE, FL 32653 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 ARVESU, ANTONIO F
Address 4817 NW 67TH ST
City-State-Zip: GAINESVILLE FL 32653

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: ANTONIO F ARVESU

OFFICER

03/12/2013

Electronic Signature of Signing Officer/Director Detail

Date