

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000044507

Entity Name: KIE-MEDICAL, INC.

Current Principal Place of Business:

6841 DONA DR.
NAVARRE, FL 32566

Current Mailing Address:

6841 DONA DR.
NAVARRE, FL 32566

FEI Number: 59-3607111

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIEFFER, THOMAS R PRES.
6841 DONA DR.
NAVARRE, FL 32566 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 PD
Name KIEFFER, THOMAS R
Address 6841 DONA DR
City-State-Zip: NAVARRE FL 32566

Title VS
Name KIEFFER, LAUREN
Address 6841 DONA DR
City-State-Zip: NAVARRE FL 32566

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: THOMAS R. KIEFFER

PRESIDENT

06/30/2017

Electronic Signature of Signing Officer/Director Detail

Date