## **2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S42544

**Entity Name: VASCOR MEDICAL CORPORATION** 

**Current Principal Place of Business:** 

4634 TARAY LANE HOLIDAY, FL 34690

**Current Mailing Address:** 

P.O. BOX 148

TARPON SPRINGS. FL 34688-0148 US

FEI Number: 59-3067361 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MACCIA, AUDREY MPRES 4488 GRAND PRESERVE PLACE PALM HARBOR, FL 34684 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 Apr 16, 2013

**Secretary of State** 

CC1785264878

Officer/Director Detail:

Title P Title VP

Name MACCIA, AUDREY Name MACCIA, VINCENT

Address 4488 GRAND PRESERVE PLACE Address 4488 GRAND PRESERVE PLACE

City-State-Zip: PALM HARBOR FL 34684 City-State-Zip: PALM HARBOR FL 34684

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: AUDREY MACCIA

**PRESIDENT** 

04/16/2013

Date