

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002592

Entity Name: ACCELERATED CARE PLUS CORP.

Current Principal Place of Business:

4850 JOULE ST A-1
RENO, NV 89502

FILED
Apr 12, 2013
Secretary of State
CC9399749014

Current Mailing Address:

10910 DOMAIN DR., STE 300
AUSTIN, TX 78758 US

FEI Number: 36-4331609

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 P
Name KOEPEL, DEBBIE
Address 4850 JOULE ST A-1
City-State-Zip: RENO NV 89502

Title T
Name RICKETTS, ANTONY
Address 4850 JOULE ST A-1
City-State-Zip: RENO NV 89502

Title D
Name ASAR, VINIT
Address 10910 DOMAIN DR., STE 300
City-State-Zip: AUSTIN TX 78758

Title S
Name MCHENRY, GEORGE E
Address 10910 DOMAIN DR., STE 300
City-State-Zip: AUSTIN TX 78758

Title D
Name MCHENRY, GEORGE E
Address 10910 DOMAIN DR., STE 300
City-State-Zip: AUSTIN TX 78758

Title CEO
Name ASAR, VINIT
Address 10910 DOMAIN DR., STE 300
City-State-Zip: AUSTIN TX 78758

Title ASST. SECRETARY
Name MESTIER, LOUIS
Address 10910 DOMAIN DR., STE 300
City-State-Zip: AUSTIN TX 78758

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: LOUIS MESTIER

ASST. SECRETARY

04/12/2013

Electronic Signature of Signing Officer/Director Detail

Date