## 2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000001045

Entity Name: SUREFIRE MEDICAL, INC.

**Current Principal Place of Business:** 

8601 TURNPIKE DRIVE

SUITE 206

WESTMINISTER, CO 80031

**Current Mailing Address:** 

8601 TURNPIKE DRIVE

SUITE 206

WESTMINISTER, CO 80031 US

FEI Number: 27-0629393 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC. 155 OFFICE PLAZA DR TALLAHASSEE, FL 32301 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** May 01, 2013

**Secretary of State** 

CC4343915512

Officer/Director Detail:

CEO Title Title CFO

CHOMAS, JAMES HOLBURN, ROBERT Name Name 8601 TURNPIKE DRIVE 8601 TURNPIKE DRIVE Address Address

> SUITE 206 SUITE 206

WESTMINISTER CO 80031 WESTMINISTER CO 80031 City-State-Zip: City-State-Zip:

Title CONTROLLER KYLE, RILEY Name

8601 TURNPIKE DRIVE Address

SUITE 206

WESTMINISTER CO 80031 City-State-Zip:

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.

05/01/2013 SIGNATURE: RILEY KYLE CONTROLLER