

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000001045

**Entity Name:** SUREFIRE MEDICAL, INC.

**Current Principal Place of Business:**

6272 W. 91ST AVENUE  
WESTMINSTER, CO 80031

**Current Mailing Address:**

PO BOX 746327  
ARVADA, CO 80006-6327 US

**FEI Number:** 27-0629393

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** MARK WILLIAMS

03/30/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name MCGREVIN, GENE  
Address 10697 BELL RD.  
City-State-Zip: JOHNS CREEK GA 30097

Title DIRECTOR  
Name TULLIS, JOHN  
Address 11760 US HIGHWAY 1 SUITE 502W  
City-State-Zip: PALM BEACH GARDENS FL 33408

Title DIRECTOR  
Name CASSIDY, KAREN  
Address 293 PEARL STREET  
City-State-Zip: BOULDER CO 80302

Title DIRECTOR  
Name WAHLSTROM, MATS  
Address 1225 SEVENTEENTH ST. STE. 1750  
City-State-Zip: DENVER CO 80202

Title DIRECTOR  
Name LUPA, MARK  
Address 6272 W 91ST AVENUE  
City-State-Zip: WESTMINSTER CO 80031

Title DIRECTOR  
Name SZELA, MARY  
Address 6272 W 91ST AVENUE  
City-State-Zip: WESTMINSTER CO 80031

Title DIRECTOR  
Name SINGHAL, ANIL  
Address 6272 W 91ST AVENUE  
City-State-Zip: WESTMINSTER CO 80031

Title DIRECTOR  
Name SONG, SIMONE  
Address 6272 W 91ST AVENUE  
City-State-Zip: WESTMINSTER CO 80031

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*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:** MARY SZELA

**PRESIDENT**

03/30/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            PRESIDENT  
Name            SZELA, MARY  
Address         6272 W. 91ST AVENUE  
City-State-Zip: WESTMINSTER CO 80031

Title            SECRETARY  
Name            SCALESE, ANTHONY  
Address         2311 ROSCOMARE RD UNIT 4  
City-State-Zip: LOS ANGELES CA 90077

Title            VICE-PRESIDENT  
Name            SCALESE, ANTHONY  
Address         2311 ROSCOMARE RD, UNIT 4  
City-State-Zip: LOS ANGELES CA 90077

Title            TREASURER  
Name            SCALESE, ANTHONY  
Address         2311 ROSCOMARE RD UNIT 4  
City-State-Zip: LOS ANGELES CA 90077