## 2017 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F11000002683

Entity Name: COMPUGROUP MEDICAL, INC.

**FILED** Jun 02, 2017 **Secretary of State** CC8403819677

## **Current Principal Place of Business:**

3300 N CENTRAL AVE **SUITE 2100** PHOENIX, AZ 85012

# **Current Mailing Address:**

3300 CENTRAL AVE **SUITE 2100** PHOENIX, AZ 85012 US

FEI Number: 32-0307150 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

VCORP SERVICES, LLC 5011 SOUTH STATE ROAD 7, SUITE 106 DAVIE, FL 33314 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:

CFO, TREASURER, DIRECTOR Title Title **DIRECTOR** 

TARRANT, JOHN TEIG, CHRISTIAN Name Name

3300 N CENTRAL AVE Address 3300 N CENTRAL AVE Address

**SUITE 2100** 

PHOENIX AZ 85012 PHOENIX AZ 85012 City-State-Zip: City-State-Zip:

Title PRESIDENT, CEO, DIRECTOR Title SECRETARY, OFFICER

BRUECKLE, BENEDIKT TARRANT, JOHN Name Name

3300 N CENTRAL AVE 3300 N CENTRAL AVE Address Address **SUITE 2100** 

**SUITE 2100** 

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PHOENIX AZ 85012 PHOENIX AZ 85012 City-State-Zip: 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.

**CFO** 

Electronic Signature of Signing Officer/Director Detail