

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000247

FILED
Apr 17, 2019
Secretary of State
1701179072CC

Entity Name: MEDICAL CONFERENCES INTERNATIONAL, INC.

Current Principal Place of Business:

1510 W. MONTANA ST.
CHICAGO, IL 60614

Current Mailing Address:

175 NORTH PATRICK BLVD
SUITE 180
BROOKFIELD, WI 53045 US

FEI Number: 34-1994134

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name GOLDMAN, ROBERT M
Address 1510 W. MONTANA ST.
City-State-Zip: CHICAGO IL 60614

Title SECRETARY, DIRECTOR
Name KLATZ, RONALD M
Address 1510 W. MONTANA ST.
City-State-Zip: CHICAGO IL 60614

Title VP
Name KROGULSKI, STEPHEN
Address 175 NORTH PATRICK BLVD
 SUITE 180
City-State-Zip: BROOKFIELD WI 53005

Title VP
Name SMITH, SIMON
Address 175 NORTH PATRICK BLVD
 SUITE 180
City-State-Zip: BROOKFIELD WI 53045

Title TREASURER
Name PENNINGTON, MARK
Address 175 NORTH PATRICK BLVD
 SUITE 180
City-State-Zip: BROOKFIELD WI 53045

Title DIRECTOR
Name BUCH, NEVILLE
Address 175 NORTH PATRICK BLVD
 SUITE 180
City-State-Zip: BROOKFIELD WI 53045

Title DIRECTOR
Name EMSLIE, J. DOUGLAS
Address 175 NORTH PATRICK BLVD
 SUITE 180
City-State-Zip: BROOKFIELD WI 53045

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: STEPHEN KROGULSKI

VICE PRESIDENT

04/17/2019

Electronic Signature of Signing Officer/Director Detail

Date