

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000023998

**Entity Name:** ADVANCED SLEEP MEDICINE INC

**Current Principal Place of Business:**

11127 MACAW COURT  
WINDERMERE, FL 34786

**Current Mailing Address:**

11127 MACAW COURT  
WINDERMERE, FL 34786 US

**FEI Number:** 46-4786180

**Certificate of Status Desired:** No

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

DEWAN, RAHUL  
11127 MACAW COURT  
WINDERMERE, FL 34786 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            DEWAN, RAHUL  
Address        11127 MACAW COURT  
City-State-Zip: WINDERMERE FL 34786

Title            VP  
Name            AHMAA, ALSHIA  
Address        11127 MACAW COURT  
City-State-Zip: WINDERMERE FL 34786

*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:** RAHUL DEWAN

**PRESIDENT**

**03/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date