

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000045766

Entity Name: C&M OSTOMY SUPPLIES, INC.

Current Principal Place of Business:

8845 LAKE PARK CIRCLE S
DAVIE, FL 33328

Current Mailing Address:

8845 LAKE PARK CIRCLE S
DAVIE, FL 33328 US

FEI Number: 65-1007954

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIEGEL, JODIE M
8845 LAKE PARK CIRCLE S
DAVIE, FL 33328 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 D
Name SIEGEL, BARBARA L
Address 8845 LAKE PARK CIRCLE S
City-State-Zip: DAVIE FL 33328

Title PVTS
Name SIEGEL, BARBARA L
Address 8845 LAKE PARK CIRCLE S
City-State-Zip: DAVIE FL 33328

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: BARBARA SIEGEL

PRESIDENT

01/26/2023

Electronic Signature of Signing Officer/Director Detail

Date