## 2015 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000121236

**Entity Name: MEDIQUIP UNLIMITED INC** 

**Current Principal Place of Business:** 

4353 OTTER WAY

NEW PORT RICHEY, FL 34653

**Current Mailing Address:** 

4353 OTTER WAY

NEW PORT RICHEY. FL 34653 US

FEI Number: 20-3405305 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTILLO, DIANNA 4353 OTTER WAY

NEW PORT RICHEY, FL 34653 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: DIANNA CASTILLO 02/11/2015

Electronic Signature of Registered Agent

Date

FILED Feb 11, 2015

**Secretary of State** 

CR9336003610

Officer/Director Detail:

Title MGR

Name CASTILLO, DIANNA Address 4353 OTTER WAY

City-State-Zip: NEW PORT RICHEY FL 34653

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.

Electronic Signature of Signing Officer/Director Detail