

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V64575

Entity Name: DISCOUNT MEDICAL SUPPLY OF FLORIDA, INC.

Current Principal Place of Business:

2045 12TH ST
SARASOTA, FL 34237

Current Mailing Address:

2045 12TH ST
SARASOTA, FL 34237 US

FEI Number: 65-0357026

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUSHIM, DEAN
2045 12TH ST
SARASOTA, FL 34237 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 DEAN, KUSHIM
Address 2045 12 ST
City-State-Zip: SARASOTA FL 34237

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: DEAN N. KUSHIM

PRESIDENT

04/23/2013

Electronic Signature of Signing Officer/Director Detail

Date