

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000003421

**Entity Name:** MEDIPLUS MOBILITY MEDICAL SUPPLIES INC.

**Current Principal Place of Business:**

7442 NW 8TH STREET  
MIAMI, FL 33126

**Current Mailing Address:**

7442 NW 8TH STREET  
MIAMI, FL 33126 US

**FEI Number:** 46-2508442

**Certificate of Status Desired:** No

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

MITCHELL J HOWARD CPA, PA  
3800 S OCEAN DRIVE STE 228  
HOLLYWOOD, FL 33019 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 RZEZNIKIEWIZ, BRUNO  
Address 3800 S OCEAN DR  
228  
City-State-Zip: HOLLYWOOD FL 33019

*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:** BRUNO RZEZNIKIEWIZ

**PRESIDENT**

**05/03/2022**

Electronic Signature of Signing Officer/Director Detail

Date