## 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. 01/31/2013

PRESIDENT

SIGNATURE: GREGORY L HORN D.M.D.

Electronic Signature of Signing Officer/Director Detail

# 2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F93000005572

#### Entity Name: MEDICAL ACCESSORIES & SUPPLY HEADQUARTERS, INC.

#### **Current Principal Place of Business:**

1130 HIGHWAY 31 SOUTH ALABASTER, AL 35007

## **Current Mailing Address:**

1130 HIGHWAY 31 SOUTH ALABASTER, AL 35007

## FEI Number: 63-0798076

## Name and Address of Current Registered Agent:

AGRO, DOT 1505-B S. FERDON BLVD. CRESTVIEW, FL 32536 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

## **Officer/Director Detail :**

Title	PC	Title	DV
Name	HORN D.M.D., GREGORY L	Name	BORDENCA, D.M.D., CHARLES
Address	1130 HIGHWAY 31 SOUTH	Address	1130 HIGHWAY 31 SOUTH
City-State-Zip:	ALABASTER AL	City-State-Zip:	ALABASTER AL

Certificate of Status Desired: No

FILED Jan 31, 2013 Secretary of State CC7877615607

Date

Date