

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 424361

FILED
Apr 28, 2004
Secretary of State

Entity Name: UNIVERSITY PHYSICIANS SUPPLY, INC.

Current Principal Place of Business:

217 VALENCIA AVE
CORAL GABLES, FL 33134

New Principal Place of Business:

217 VALENCIA AVE
CORAL GABLES, FL 331345905 US

Current Mailing Address:

217 VALENCIA AVE
CORAL GABLES, FL 33134

New Mailing Address:

217 VALENCIA AVENUE
CORAL GABLES, FL 331345905 US

FEI Number: 59-1525451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, JOSEPH L
2435 HOLLYWOOD BOULEVARD
HOLLYWOOD, FL 33020

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDST () Delete
Name: NABORS, WILLIAM
Address: 9572 SW 8TH STREET
City-St-Zip: HOLLYWOOD, FL 330251120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change () Addition
Name: NABORS, WILLIAM R.PH.
Address: 9572 SW 8TH STREET
City-St-Zip: PEMBROKE PINES, FL 330251120 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM NABORS

PDST

04/28/2004

Electronic Signature of Signing Officer or Director

Date