

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F02000004020

FILED
Apr 30, 2003
Secretary of State

Entity Name: MOBILE MEDICAL INDUSTRIES, INC.

Current Principal Place of Business:

777 YAMATO ROAD, SUITE 330
BOCA RATON, FL 33431

New Principal Place of Business:

2500 QUANTUM LAKES DRIVE
SUITE 108
BOYNTON BEACH, FL 33426

Current Mailing Address:

777 YAMATO ROAD, SUITE 330
BOCA RATON, FL 33431

New Mailing Address:

2500 QUANTUM LAKES DRIVE
SUITE 108
BOYNTON BEACH, FL 33426

FEI Number: 65-0976081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

MYRICK, KIM CFO
2500 QUANTUM LAKES DRIVE
SUITE 108
BOYNTON BEACH, FL 33426 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: KIM MYRICK

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: LECHNER, BRIAN
Address: 777 YAMATO ROAD, SUITE 330
City-St-Zip: BOCA RATON, FL 33431

Title: VST () Delete
Name: MYRICK, KIM
Address: 777 YAMATO ROAD, SUITE 330
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: GALANT, PAUL
Address: 777 YAMATO ROAD, SUITE 330
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LECHNER, BRIAN
Address: 2500 QUANTUM LAKE DRIVE, SUITE 108
City-St-Zip: BOYNTON BEACH, FL 33426

Title: CFO (X) Change () Addition
Name: MYRICK, KIM
Address: 2500 QUANTUM LAKE DRIVE, SUITE 108
City-St-Zip: BOYNTON BEACH, FL 33426

Title: CHR (X) Change () Addition
Name: KAPLAN, MIKE
Address: 2500 QUANTUM LAKES DRIVE
City-St-Zip: BOYNTON BEACH, FL 33426

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: KIM MYRICK

CFO

04/30/2003

Electronic Signature of Signing Officer or Director

Date