


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000001250	
1. Entity Name MEDICAL DELIVERY SERVICES OF NEW YORK, INC.	

Principal Place of Business 441 CARNATION AVE. FLORAL PARK, NY 11001	Mailing Address 2901 WEST BUSCH BLVD. SUITE 805 TAMPA, FL 33618
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DO NOT WRITE IN THIS SPACE



01092004 No Chg-P CR2E034 (10/03)

4. FEI Number 11-2445272	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PHILLIPS, PAUL B 2901 WEST BUSCH BLVD., SUITE 805 TAMPA, FL 33618

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE George F Phillips GEORGE F PHILLIPS VICE PRESIDENT 1/14/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD PHILLIPS, GEORGE F 411 CARNATION AVE. FLORAL PARK, NY 11001
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PHILLIPS, PAUL B 2901 W. BUSCH BLVD., SUITE 805 TAMPA, FL 33618
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01/20/04-80012-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: George F Phillips GEORGE F. PHILLIPS VICE PRESIDENT 1/14/04 813-931-0107
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #