FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

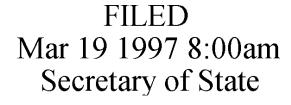
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600001020 (4)

MEDICAL SPECIALTIES DISTRIBUTORS, INC.

Principal		of Business	;
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Mailing Address





58 NORFOLK AVENUE SOUTH EASTON MA 02375		58 NORFOLK AVENUE South Easton Ma 02375-1181				
					 Date Incorporated or Qualified 02/28/1996 	3a, Date of Last Report
	lace of Business	2a, Mailing Address			4, FEI Number	Applied For
21		26			04-3164863	Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.			5, Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Countr 30	у		Yes 🗌 No
	Name and Address of Currer	it Registered Agent		T	10. Name and Address of New Reg	Istered Agent
	CORPORATION SYSTEM		81	Name		
	SOUTH PINE ISLAND ROAD		82	Street Add	dress (P.O. Box Number is Not Acceptable	e)
PLAI	NTATION FL 33324		83			
			63	1		
			84			FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607.1508, Florida Statut of Florida. Such change was	es, the above	e-named cor y the corpora	rporation submits this statement for the pu alion's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
agent. i a SIGNATURE	ım tamıllar witn, and accept the oblig	ations of, Section 607.0505, FA	onda Statute	·S.		
	Signature, typed or printed name of registered age			eni signature requ	uited when reinstating)	DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	PD MILIONANT IONALIA	DELETE	1.1 TITLE		DIRECTOR	Change Addition
NAME	WHISNANT, JOHN W 58 NORFOLK AVENUE		1.2 NAME		STAN GARRY	
STREET ADDRESS CITY-ST-ZIP	SOUTH EASTON MA		1.3 STREE	ADDRESS	SOUTH EASTEN NA	ļ
TITLE	ST	DELF TE	2 1 TITLE		SOUTH EASTEN MA	Change Addition
NAME	HOPKIN, KERRY G		2.2 NAME		JOHN MAKI	
STREET ADDRESS	58 NORFOLK AVENUE		1		58 ABREOLIK AND	
CITY-ST-ZIP	SOUTH EASTON MA		2. 4 CITY	' -	SOUTH BOSTON MA	
TALE	D	▼ DELE1E	3.1 TITLE		EDWARD CONRAD	Change Addition
NAME	KHEDERIAN, ROBERT P		3.2 NAME		DIRECTOR	ļ
STREET ADDRESS	58 NORFOLK AVENUE		3 3 STHEE	ADDRESS :	58 HORFOLK AUS	
CITY-ST-ZIP	SOUTH EASTON MA		3.4. CITY-	ST-2/P	SO. CASTON MA	
TITLE	D	Æ DELETE	4.1 TO LE		DIRECTOR	Change 🙀 Addition
NAME	RAND, JOHN F		4, 2 NAME	1 -	STEPHEN PAGLINCA	
STREET ADDRESS	58 NORFOLK AVENUE		4	ADDRESS	88 HORALK AND	
CITY-ST-ZIP TITLE	SOUTH EASTON MA	RT DELETE	4.4 CITY - 5.1 TITLE	ST-ZIP	so, batton ma	Change Addition
NAME	SIMONI, CARLO	CX Dittit	5.1 HILL 5.2 NAME	- [CT Augusts CT Worldon
STREET ADDRESS	58 NORFOLK AVENUE			I ADDRESS		
CITY-ST-ZIP	SOUTH EASTON MA		5.3 STREE			
TITLE	AS	DELETE	6.1 TITL€	71 211		Change Addition
NAME	RIDBERG, MICHAEL D		6.2 NAME	ļ	30000211 -03/20/970101	9 <u>(2</u> 3
STREET ADDRESS	3 BETHESDA METRO CENTER	, STE 650	63 STREE	I ADDRESS		CU41
CITY-ST-ZIP	BETHESDA MD		6.4 CITY-	S1 - 71P	***165.00	

14. I do hereby certily that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under with; the 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 nar appears in Block 12 or Block 13 if ghanged, or on an attachment with an address.

CICNIATUDE.

(OUNDED)

3/5/97

(508)238-8390 3