2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J04213

Entity Name: PROFESSIONAL MEDICAL SALES INC.

FILED Apr 23, 2004 Secretary of State

Lineity Ivai	c. 1 101 2001	ONAL MEDICAL CALLO, IIV	J.		
Current Principal Place of Business:			New Principal Place of Business:		
	JNTER RRAMORE AVE D, FL 328011123				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	JNTER RRAMORE AVE D, FL 328011123				
FEI Number:	: 59-2691945	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	RRAMORE AVE	JS			
	named entity su e of Florida.	bmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electronic	Signature of Registered Age	ent	Date	
Election Car	mpaign Financing 1	rust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () D HUNTER, REX, 520 N PARRAMO ORLANDO, FL 32	RE AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: REX HUNTER P 04/23/2004