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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K17822** (3)

1. Corporation Name
MEDI-WHEELS SYSTEMS INC.

Principal Place of Business	Mailing Address
5509 SW 63RD AVENUE S MIAMI FL 3315 US	5509 SW 63RD AVENUE S.MIAMI FL 33155-6254 US

3. Date Incorporated or Qualified: 03/11/1988
3a. Date of Last Report: 10/24/1996

	2. Principal Place of Business	2a. Mailing Address
21/26	7019 S.W 13 ST	7019 S.W. 13 ST
Suite, Apt. #, etc. 22/27	#200	#200
City & State 23/28	MIAMI FL.	MIAMI - FL.
Zip 24/29	33144	33144
Country 25/30		

4. FEI Number: 65-0034764 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ROMERO, LUIS A
5509 SW 63RD AVE
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 7019 S.W. 13 ST #200
83
84 City MIAMI FL 85 Zip Code 33144

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	ROMERO, LUIS A		1.2 NAME		
STREET ADDRESS	5509 SW 63RD AVE		1.3 STREET ADDRESS	7019 S.W 13 ST #200	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	MIAMI - FL - 33144	
TITLE	SD	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	ROMERO, ESPERANZA		2.2 NAME		
STREET ADDRESS	5509 SW 63RD AVE		2.3 STREET ADDRESS	7019 S.W 13 ST #200	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	MIAMI - FL 33144	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	500002309415---9	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	-10/01/97--01112--011	
TITLE		☐ DELETE	4.1 TITLE	****550.00	☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do hereby certify 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 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 12 or Block 13 if changed or added on an attachment with an address.

SIGNATURE: LUIS A ROMERO 9-25-97 305-2685666