2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L03607

Entity Name: MISTER MEDICAL, INC.

DELRAY BEACH, FL 33446

City-St-Zip:

FILED Feb 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Bu	New Principal Place of Business:	
6586 W. ATLANTIC AVE PMB 300 DELRAY BEACH, FL 33446 US			6586 W. ATLANTIC AVE DELRAY BEACH, FL 33446	US	
			DELKAT BEACH, FE 33440	DELICAT BEACH, TE 33440 GG	
Current M	lailing Address	s:	New Mailing Address:	New Mailing Address:	
PMB 300	TLANTIC AVE BEACH, FL 334	46 US	6586 W. ATLANTIC AVE DELRAY BEACH, FL 33446	US	
FEI Number:	65-0132888	FEI Number Applied For ()	FEI Number Not Applicable () Ce	rtificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
2000 WEŚ SUITE 110 BOCA RA ⁻ The above in the State	TON, FL 33431 named entity s e of Florida.	US	ne purpose of changing its registered office	e or registered agent, or both,	
SIGNATUR		c Signature of Registered /	Agent	 Date	
	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () GINSBURG, GAI 7338 CORTES L DELRAY BEACH	AKE DRIVE	Title: () Cha Name: Address: City-St-Zip:	ange () Addition	
Title: Name:	S () GINSBURG, ADR	*	Title: () Cha Name: Address:	ange () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GARY GINSBURG DP 02/13/2009