

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023919

Entity Name: J.A.D. MEDICAL EQUIPMENT, INC.

FILED
Jan 11, 2005
Secretary of State

Current Principal Place of Business:

1171 W. 35TH STREET
HIALEAH, FL 33012

New Principal Place of Business:

12901 W OKEECHOBEE RD STE F-2
HIALEAH GARDENS, FL 33016 US

Current Mailing Address:

1171 W. 35TH STREET
HIALEAH, FL 33012

New Mailing Address:

12901 W OKEECHOBEE RD STE F-2
HIALEAH GARDENS, FL 33016 US

FEI Number: 65-0988343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, JOSE
682 WEST 65 DR.
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GONZALEZ, JOSE A
Address: 682 WEST 65 DR.
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, JOSE A
Address: 682 WEST 65 DR.
City-St-Zip: HIALEAH, FL 33012 US

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: JOSE A GONZALEZ

P

01/11/2005

Electronic Signature of Signing Officer or Director

Date