2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) (Amended)

FILED

03 JUL -3 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Entity Name

PREMIER MEDICAL EQUIPMENT AND SUPPLIES, CORP. P00000026034

000021450190
07/10/03--01007--032 **61.25

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
7225 N.W. 25th STREET, # 117 MIAMI, FL 33122	

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
J. EVERETT WILSON, ESQ. WILSON, SUAREZ, & LOPEZ 2151 LEJEUNE ROAD, MEZZANINE CORAL GABLES, FL 33134	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE X _____ 6/19/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILING FEE IS $150.00
Certified Copy Fee will be $55.00 Additional
Make Check Payable to: Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT ALINA SERRA 7225 N.W. 25th STREET, SUITE 117 MIAMI, FL 33122	☑ Delete	PRESIDENT OSVALDO PRADO 7225 N.W. 25th STREET, SUITE 117 MIAMI, FL 33122	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR ALINA SERRA 7225 N.W. 25th STREET, SUITE 117 MIAMI, FL 33122	☑ Delete	DIRECTOR OSVALDO PRADO 7225 N.W. 25th STREET, SUITE 117 MIAMI, FL 33122	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	SECRETARY OSVALDO PRADO 7225 N.W. 25th STREET, SUITE 117 MIAMI, FL 33122	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X O Prado PRESIDENT/SECRETARY 6/19/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #