

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000042422

**FILED**  
**Mar 26, 2012**  
**Secretary of State**

**Entity Name:** A & C MEDICAL RENTALS & SUPPLIES, INC.

**Current Principal Place of Business:**

2742 SW 8TH ST., STE. 28  
MIAMI, FL 33125

**New Principal Place of Business:**

2742 SW 8TH ST., STE. 28  
MIAMI, FL 33135

**Current Mailing Address:**

2742 SW 8TH ST., STE. 28  
MIAMI, FL 33125

**New Mailing Address:**

2742 SW 8TH ST., STE. 28  
MIAMI, FL 33135

**FEI Number:** 65-1002553

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GONZALEZ, ANNA  
2742 SW 8TH ST., STE. 28  
MIAMI, FL 33125 US

**Name and Address of New Registered Agent:**

GONZALEZ, ANNA  
2742 SW 8TH ST., STE. 28  
MIAMI, FL 33135 US

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:

03/26/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: GONZALEZ, ANNA  
Address: 2742 SW 8TH ST., STE. 28  
City-St-Zip: MIAMI, FL 33135

Title: D  
Name: GONZALEZ, ANNA  
Address: 2742 SW 8TH ST., STE. 28  
City-St-Zip: MIAMI, FL 33135

I hereby 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 all other like empowered.

SIGNATURE: ANNA GONZALEZ

PDTE

03/26/2012

Electronic Signature of Signing Officer or Director

Date