P01000036717

(Requestor's Name)							
(Address)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(,,							
(Document Number)							
Certified Copies Certificates of Status							
Consideration to Filips Officer							
Special Instructions to Filing Officer:	i						
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Office Use Only



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14 CRETARY OF STATE IL AHASSEE, FLORIO.

07/21/03--01070--009 **35.00

BUROSERV

July 15, 2003

Carol Mustain

Ref: Letter # 403A00040684

Enclose you will find proof of name registration for registered agent, a check for \$35. To cover cost of change of same

Please apply prior payment to the cost of Amendment of Articles of incorporation.

11/14

Sincerely

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		ections 607.0502, 61					
this statement of Florida		itted for a corporatio o change its register					
of Florida.					ŕ		
-	the corporation:	D A C Medical Equi	pment, Inc	<u> </u>			
2. The principal office address: 1800 W 49th Street, Ste 324R Hialeah Fi 33012							
3. The mailing	address (if differe	ent):					
4. Date of inco	rporation/qualific	ation: April 11, 200	1 Documen	t number: P010	00036717		
	nd street address o artment of State:	of the current registere	ed agent and register	red office on file	with the		
	Douglas Alexan	der Canizares		يتر	_ું ⊖		
7890 SW 15th Street							
	Miami, FI 33144			The state of the s			
6. The name a changed):	and street address	of the new registere	ed agent (if change	·			
changea).	Buroserv				SIN C		
	10585 SW 109th Court, Ste 201 (P.O. Box or personal mailbox NOT acceptable)						
	Miami, Fl 33176	(F.O. DOX OF personal man	ook (vor acceptable)				
The street addragent, as change	ress of its register ged will be identi-	red office and the streat.	eet address of the b	usiness office of	its registered		
Such change wanthorized by	vas authorized by the board, or the	resolution duly ador corporation has been	oted by its board of notified in writing	directors or by a of the change.	n officer so		
lalo	er, chairman is rise chair	25 /	Douglas A Canizare	s, President/Directed name and title)	tor_		
I nereby accep I further agree performance o registered age	if the appointment to comply with the f my duties, and learn to the or if this doc	t as registered agent he provisions of all s I am familiar with an cument is being filed that the corporation	and agree to act in statutes relative to to ad accept the obligation merely to reflect a	this capacity. he proper and co tion of my positi change in the re	gisterea		
1	///		June, 24 2003		<u></u>		
	Signature of Registered A	gorft)	. (Date)			
If signing on beha	alf of an entity: ancisco De La Paz		Propietor		•		
	Clyped or Printed Name)			anacity)			

* * * FILING FEE: \$35.00 * * *