

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000044996

**FILED**  
**Nov 10, 2009**  
**Secretary of State**

**Entity Name:** SUPLIMED INTERNATIONAL INC.

**Current Principal Place of Business:**

12151 SW 128 CT.  
103  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

12151 SW 128 CT  
103  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 65-1101040

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SALIBA, MARCILIO  
15251 SW 108 TERRACE  
MIAMI, FL 33196 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:** MARCILIO SALIBA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD ( ) Delete  
**Name:** SALIBA, MARCILIO  
**Address:** 15251 SW 108 TERRACE  
**City-St-Zip:** MIAMI, FL 33196

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**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:** MARCILIO SALIBA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PD

11/10/2009

\_\_\_\_\_  
Date