2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 01, 2008
Secretary of State

DOCUMENT# P01000058205

Entity Name: CENTRAL MEDICAL EQUIPMENT SUPPLY, INC.

Current Principal Place of Business:

4660 SW 74 AVE
MIAMI, FL 33155

New Principal Place of Business:

2901 W.BUSCH BLVD
SUITE 916
TAMPA, FL 33618

Current Mailing Address:

2901 W. BUSCH BLVD.
SUITE 916
TAMPA, FL 33618

New Mailing Address:

2901 W.BUSCH BLVD
SUITE 916
TAMPA, FL 33618

FEI Number: 65-1118982 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BERMUDEZ, ISMAYEXIL
2901 W. BUSCH BLVD. #916
TAMPA, FL 33618 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: ISMAYEXIL BERMUDEZ
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: BERMUDEZ, ISMAYEXIL
Address: 2901 WEST BUSCH BLVD. #916
City-St-Zip: TAMPA, FL 33618

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: ISMAYEXIL BERMUDEZ PST 12/01/2008
Electronic Signature of Signing Officer or Director — Date