

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068276

FILED
Mar 05, 2005
Secretary of State

Entity Name: BAY AREA MEDICAL SUPPLIES, INC.

Current Principal Place of Business:

3300 9TH ST N
SAINT PETERSBURG, FL 33704

New Principal Place of Business:

3300 DR. MLK JR. ST. NO.
SAINT PETERSBURG, FL 33704

Current Mailing Address:

5830 28TH STREET SOUTH
ST PETERSBURG, FL 33712 US

New Mailing Address:

FEI Number: 59-3730765 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DAVIS, RICARDO A
5830 28TH STREET SOUTH
ST PETERSBURG, FL 33712 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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: DAVIS, RICARDO A
Address: 5830 28TH STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33702

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 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 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: RICARDO A. DAVIS

PRES

03/05/2005

Electronic Signature of Signing Officer or Director

Date