

7/9

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-09-2002 90018 047 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000070739

1. Entity Name

MEDWAY MEDICAL SUPPLIES, INC.

Principal Place of Business

2100 WEST 76 STREET #203
HIALEAH FL 33016

Mailing Address

2100 WEST 76 STREET #203
HIALEAH FL 33016

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

651123790

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, MARISOL
 6480 WEST 13 AVE.
 HIALEAH FL 33012

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

7-2-02

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D SANCHEZ, MARISOL 6480 WEST 13 AVE. HIALEAH FL 33012	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-2-02

CR2E034 (4/02)

Attachment

PO1000070739

MEDWAY MEDICAL SUPPLIES, INC.

39325

2100 W 76 STREET SUITE 302

Hialeah, FL 33016

Ph (305) 824-8666

Fax (305) 820-0006

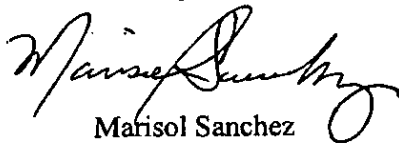
July 2, 2002

Division Of Corporations
Uniform Business Report Filings
PO BOX 1500
Tallahassee, FL 32302-1500

To whom it may concern,

The Uniform Business report (UBR) was sent to Medway Medical Supplies, Inc on Monday July 2, 2002 for the first time. For this reason, we call the office of Uniform Business Report to inform them. They explain to us that this letter must be submitted to your office with a check of \$150.00 to wave off the penalty of \$550.00. If you have any further question, please contact me at (305) 824-8666.

Thank you!



Marisol Sanchez
President

Attachment PO1000070739

39325

MEDWAY MEDICAL SUPPLIES, INC.

2100 W 76 STREET SUITE 302
Hialeah, FL 33016
Ph (305) 824-8666
Fax (305) 820-0006

July 18, 2002

Division Of Corporations
Uniform Business Report Filings
PO BOX 1500
Tallahassee, FL 32302-1500

To whom it may concern,

Please be inform that the address you have on file is incorrect. The correct address is
2100 W 76 Street Suite 302, Hialeah, FL 33016.

The Federal Employer number is 65-1123790.

Thank you!



Marisol Sanchez
President