

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111927

FILED
Apr 12, 2005
Secretary of State

Entity Name: ATLANTIC MEDICAL EQUIPMENT CORPORATION

Current Principal Place of Business:

1616 N FLORIDA MANGO RD
STE 6A
WEST PALM BEACH, FL 33409

New Principal Place of Business:

560 VILLAGE BLVD
STE 335
WEST PALM BEACH, FL 33409

Current Mailing Address:

1616 N. FLORIDA MANGO RD
STE 6A
WEST PALM BEACH, FL 33409

New Mailing Address:

560 VILLAGE BLVD
STE 335
WEST PALM BEACH, FL 33409

FEI Number: 59-3759868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATTAGLIA, JOHN
9116 BAY POINTE CIR.
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

BATTAGLIA, JOHN
1616 N. FLORIDA MANGO RD
STE 12
WEST PALM BEACH, FL 33409 US

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:

04/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: BATTAGLIA, JOHN
Address: 9116 BAYPOINTE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D () Delete
Name: BATTAGLIA, KATHLEEN M
Address: 9116 BAYPOINTE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: BATTAGLIA, JOHN
Address: 1117 YARROW ST
City-St-Zip: MATTHEWS, NC 28104

Title: O (X) Change () Addition
Name: BATTAGLIA, KATHLEEN M
Address: 1216 CURTIS CREEK RD
City-St-Zip: ELK PARK, NC 28622

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: KATHLEEN M. BATTAGLIA

MRS

04/12/2005

Electronic Signature of Signing Officer or Director

Date