

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000008376

FILED
Mar 12, 2007
Secretary of State

Entity Name: ROSMAR MEDICAL EQUIPMENT INC.

Current Principal Place of Business:

8743 SW 9TH TERRACE
SUITE 1
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

8743 SW 9TH TERRACE
SUITE 1
MIAMI, FL 33174

New Mailing Address:

FEI Number: 01-0602226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEYVA, RAQUEL M
4711 N.W. 79 AVE., #5E
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

LEYVA, RAQUEL M
8743 S W 9 TERRACE
SUITE 1
MIAMI, FL 33174 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: RAQUEL M LEYVA

03/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEYVA, RAQUEL M
Address: 8743 SW 9TH TERRACE, SUITE 1
City-St-Zip: MIAMI, FL 33174

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 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: RAQUEL M LEYVA

PRE

03/12/2007

Electronic Signature of Signing Officer or Director

Date