2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P02000010896

DOCUMENT # 1. Entity Name

MED-TRAIN DISTRIBUTORS, INC.



FILED Apr 02, 2003 8:00 am Secretary of State

04-02-2003 90053 016 ***150.00

					1	1857						
Principal Place of Business 6917 NW 46TH STREET MIAMI FL 33166			Mailing Address 6917 NW 46TH STREET MIAMI FL 33166		, .							
2. Principal Place of Business Suite, Apt. #, etc. City & State			3. Mailing Address Suite, Apt. #, etc. City & State									
							CHECK HERE IF MAKING CHANGES					
							4. FEI Number 039998				Applied For	
											Not Applicable	1
Zìp	Zip Country		Zip Cour		ntry		5. Certificate of Status Desired S8.75 Addition Fee Required					
	6. Name	and Address of Current	Registered Agent				7. Name a	nd Address of New	Registered	Agent	٠	1
٠					Name]
RODRIGUEZ, ELIOT					Street A			iber is Not Acceptabl		4. 		1
6917 NW	46TH STRE	ET			Oliccin	aaress (r	.O. Box right					4
MIAMI FL	33166	. •									-,	
					City				FL	Zip C	ode	1
8. The above	named entity	y submits this statement fo	or the purpose of changing its	s register	ed office or	registere	ed agent, or t	ooth, in the State of F	lorida. I am	familiar wi	th, and accept	1
	tions of regist			-								
SIGNATURE .												
SIGNATORIC .	Signature, typed	or printed name of registered agent	and title if applicable. (NO	TE: Registere	ed Agent signati	are required	when reinstating)		DATE]
	ILE NOW!	· · · · · · · · · · · · · · · · · · ·										
T.	ILC INVIII	! FEE IS \$150.00					۵	Election Campaign Fi	inancina	¢ F	OO Mariona	
After	r May 1, 200	3 Fee will be \$550.00					l l	Election Campaign Fi Trust Fund Contribution			.00 May Be ded to Fees	
After Make Check	r May 1, 200	3 Fee will be \$550.00 Florida Department o					,	Trust Fund Contribution	on. [☐ Ad	ded to Fees	
After	r May 1, 200 k Payable to	3 Fee will be \$550.00	DIRECTORS	11.		Mes	ADDITION	Trust Fund Contribution	on. [D DIRECTO	DRS IN 11	1
After Make Check 10.	r May 1, 200 k Payable to	3 Fee will be \$550.00 Florida Department of OFFICERS AND		TITL	E	PRES	ADDITION	Trust Fund Contribution	on. [☐ Ad	DRS IN 11	1000
After Make Check 10. TITLE NAME	r May 1, 200 k Payable to D RODRIGUI	3 Fee will be \$550.00 Florida Department of OFFICERS AND EZ, ELIOT	DIRECTORS	TITL NAM	E NE	PRES	ADDITION	Trust Fund Contribution	on. [D DIRECTO	DRS IN 11	(40/00)
After Make Check 10.	r May 1, 200 k Payable to D RODRIGUI	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS	TITL NAM STRI	E	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ELEOT FLETOT 16 ST.	on. [D DIRECTO	DRS IN 11	140/00)
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	r May 1, 200 k Payable to D RODRIGUI 6917 NW	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS Delete	TITL NAM STRI CITY	E HE EET ADDRESS '-ST-ZIP	ROSE	ADDITION TOUEZ,	Trust Fund Contribution	on. [D DIRECTO	ded to Fees DRS IN 11 DR	DOTO 4 (40/00)
After Make Check 10. TITLE NAME STREET ADDRESS	r May 1, 200 k Payable to D RODRIGUI 6917 NW	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS	TITL NAM STRI	E ME EET ADDRESS '-ST-ZIP E	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ECTOP ELIZOT 46 ST.	on. [□ Add D DIRECTO Chang	ded to Fees DRS IN 11 DR	CB0E024 (40,000)
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	r May 1, 200 k Payable to D RODRIGUI 6917 NW	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS Delete	THE NAM STRI CHTY THE NAM	E ME EET ADDRESS '-ST-ZIP E	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ECTOP ELIZOT 46 ST.	on. [□ Add D DIRECTO Chang	ded to Fees DRS IN 11 DR	CD0E024 (40,000)
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	r May 1, 200 k Payable to D RODRIGUI 6917 NW	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS Delete	TITE NAM STRI CITY TITE NAM STRI	E HE EET ADDRESS '-ST-ZIP E	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ECTOP ELIZOT 46 ST.	on. [□ Add D DIRECTO Chang	ded to Fees DRS IN 11 DR	CD0004 (4000)
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	r May 1, 200 k Payable to D RODRIGUI 6917 NW	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS Delete	THE NAM STRICTLY NAM STRICTLY NAM STRICTLY TITL	E HE	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ECTOP ELIZOT 46 ST.	on. [□ Add D DIRECTO Chang	DRS IN 11 DE Addition DE Addition	CB2Ec24 (49(02)
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	r May 1, 200 k Payable to D RODRIGUI 6917 NW	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS Delete Delete	TITL NAM STRI CITY TITL NAM STRI CITY TITL	E HE	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ECTOP ELIZOT 46 ST.	on. [☐ Add	DRS IN 11 DE Addition DE Addition	CB0E024 (4000)
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	r May 1, 200 k Payable to D RODRIGUI 6917 NW MIAMI FL	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS Delete Delete	TITL NAM STRI CITY TITL NAM STRI CITY TITL NAM STRI NAM STRI	E HE EET ADDRESS (*-ST-ZIP E EET ADDRESS (*-ST-ZIP E HE EET ADDRESS EET ADDRESS EET ADDRESS	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ECTOP ELIZOT 46 ST.	on. [☐ Add	DRS IN 11 DE Addition DE Addition	000000
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	r May 1, 200 k Payable to D RODRIGUI 6917 NW	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS Delete Delete Delete	TITL NAM STRI CITY TITL NAM STRI CITY TITL NAM STRI CITY TITL NAM STRI CITY CITY	E HE	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ECTOP ELIZOT 46 ST.	on. [☐ Add D DIRECTO Chang ☐ Chang	DRS IN 11 DR Addition DR Addition DR Addition	CO0001 (40)00)
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE	r May 1, 200 k Payable to D RODRIGUI 6917 NW MIAMI FL	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS Delete Delete	TITL NAM STRI CITY NAM STRI CITY TITL NAM STRI CITY TITL STRI CITY TITL STRI CITY TITL TITL TITL TITL TITL TITL TITL T	E HE EET ADDRESS (-ST-ZIP E HE EET ADDRESS (-ST-ZIP E HE EET ADDRESS (-ST-ZIP E HE EET ADDRESS EET ADDRESS EET ADDRESS EET ADDRESS (-ST-ZIP E HE EET ADDRESS EET ADDRESS EET ADDRESS (-ST-ZIP E HE EET ADDRESS EET ADDRESS E	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ECTOP ELIZOT 46 ST.	on. [☐ Add	DRS IN 11 DR Addition DR Addition DR Addition	CB2E024 (40(00)
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	r May 1, 200 k Payable to D RODRIGUI 6917 NW MIAMI FL	OFFICERS AND EZ, ELIOT 46TH STREET	DIRECTORS Delete Delete Delete	TITL NAM STRI CITY TITL NAM STRI CITY TITL NAM STRI CITY TITL NAM STRI CITY	E HE EET ADDRESS (-ST-ZIP E HE EET ADDRESS (-ST-ZIP E HE EET ADDRESS (-ST-ZIP E HE EET ADDRESS EET ADDRESS EET ADDRESS EET ADDRESS (-ST-ZIP E HE EET ADDRESS EET ADDRESS EET ADDRESS (-ST-ZIP E HE EET ADDRESS EET ADDRESS E	ROSE	ADDITION TOUEZ,	Trust Fund Contribution IS/CHANGES TO/OF ECTOP ELIZOT 46 ST.	on. [☐ Add D DIRECTO Chang ☐ Chang	DRS IN 11 DR Addition DR Addition DR Addition	(00)00) 1000000

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

SIGNATURE:

TITLE NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

Delete

PRELITOT ADJATINEZ PRESTAENT

1116-609-206

Change

Change

☐ Addition

☐ Addition