

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000011812

Entity Name: JBH MEDICAL EQUIPMENT CORP.

FILED  
Jun 27, 2005  
Secretary of State

## Current Principal Place of Business:

9507 SW 160 ST  
#230  
MIAMI, FL 33177

## New Principal Place of Business:

133 SW 22 AVENUE  
MIAMI, FL 33135 US

## Current Mailing Address:

9507 SW 160 ST  
#230  
MIAMI, FL 33177

## New Mailing Address:

133 SW 22 AVENUE  
MIAMI, FL 33135 US

FEI Number: 02-0565131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUILES, BRENDA L  
15517 S.W. 139 CT.  
MIAMI, FL 33177 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: QUILES, BRENDA L  
Address: 155 17 SW 139 CY  
City-St-Zip: MIAMI, FL 33177

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: QUILES, BRENDA L  
Address: 15517 SW 139 CT  
City-St-Zip: MIAMI, FL 33177

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: BRENDA L QUILES

P

06/27/2005

Electronic Signature of Signing Officer or Director

Date