

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000013260

Entity Name: AEROMED SYSTEMS, INC.

FILED
Oct 16, 2006
Secretary of State

Current Principal Place of Business:

2101 SW 87TH PLACE
OCALA, FL 34476

New Principal Place of Business:

3740 SW 7TH STREET
OCALA, FL 34474

Current Mailing Address:

2101 SW 87TH PLACE
OCALA, FL 34476

New Mailing Address:

PO BOX 770311
OCALA, FL 34477

FEI Number: 03-0386826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCQUAIG, ROBERT
2101 SW 87TH PLACE
OCALA, FL 34476 US

Name and Address of New Registered Agent:

MCQUAIG, ROBERT
3740 SW 7TH STREET
OCALA, FL 34474 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: ROBERT MCQUAIG

10/16/2006

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: D () Delete
Name: MCQUAIG, ROBERT
Address: 2101 SW 87TH PLACE
City-St-Zip: OCALA, FL 34476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCQUAIG, ROBERT
Address: 3740 SW 7TH STREET
City-St-Zip: OCALA, FL 34474

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: ROBERT MCQUAIG

D

10/16/2006

Electronic Signature of Signing Officer or Director

Date