

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90073 025 ***158.75

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000024744 1. Entity Name QUALITY MEDICAL SUPPLY, INC.			
Principal Place of Business 8320 NW 68 ST MIAMI, FL 33166		Mailing Address 8320 NW 68 ST MIAMI, FL 33166	
2. Principal Place of Business 6382 NW 97 Ave		3. Mailing Address 6382 NW 97 Ave	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Miami - FL		City & State Miami - FL	
Zip 33148		Zip 33148	
Country USA		Country USA	
6. Name and Address of Current Registered Agent PORTELA, RENE 8320 NW 68 ST MIAMI, FL 33166		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 6382 NW 97th Ave City Miami <div style="float: right;"> State FL Zip Code 33148 </div>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u><i>René Portela</i></u> RENE PORTELA <u>PRESIDENT</u> <u>2/3/2005</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PSTD	NAME PORTELA, RENE	TITLE Change	NAME 6382 N.W. 97th Ave
STREET ADDRESS 8320 NW 68 ST	CITY-ST-ZIP MIAMI, FL 33166	STREET ADDRESS miami - FL - 33178	CITY-ST-ZIP miami - FL - 33178
TITLE D	NAME PORTELA, RENE R	TITLE Change	NAME 6382 N.W. 97th Ave
STREET ADDRESS 8320 NW 68 ST	CITY-ST-ZIP MIAMI, FL 33166	STREET ADDRESS miami - FL - 33178	CITY-ST-ZIP miami - FL - 33178
TITLE D	NAME PORTELA, MICHAEL J	TITLE Change	NAME 6382 N.W. 97th Ave
STREET ADDRESS 8320 NW 68 ST	CITY-ST-ZIP MIAMI, FL 33166	STREET ADDRESS miami - FL - 33178	CITY-ST-ZIP miami - FL - 33178
TITLE D	NAME PORTELA, ROSA M	TITLE Change	NAME 6382 N.W. 97th Ave
STREET ADDRESS 8320 NW 68 ST	CITY-ST-ZIP MIAMI, FL 33166	STREET ADDRESS miami - FL - 33178	CITY-ST-ZIP miami - FL - 33178
TITLE Change	NAME Change	TITLE Change	NAME Change
STREET ADDRESS Change	CITY-ST-ZIP Change	STREET ADDRESS Change	CITY-ST-ZIP Change
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.			
SIGNATURE: <u><i>René Portela</i></u> RENE PORTELA <u>PRES</u>		Date: <u>2/3/2005</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #: <u>305.693-0860</u>	

50015125



02032005 Chg-P CR2E034 (10/03)

4. FEI Number
03-0412356
Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**