2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2010
Secretary of State

DOCUMENT# P02000075255

Entity Name: SUNRISE MEDICAL EQUIPMENT & OXYGEN, INC.

Current Principal Place of Business:

10358 NW 55TH STREET
SUNRISE, FL 33351

New Principal Place of Business:

4700 NORTH HIATUS ROAD
SUITE# 152-A
SUNRISE, FL 33351

Current Mailing Address:

10358 NW 55TH STREET
SUNRISE, FL 33351

New Mailing Address:

4700 NORTH HIATUS ROAD
SUITE# 152-A
SUNRISE, FL 33351

FEI Number: 03-0474058 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH,HENRY,MCGUIRE & ASSOCIATES, INC.
4330 W BROWARD BLVD STE P
PLANTATION, FL 33317 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD
Name: CAMPBELL, WALTER P
Address: 4631 NW 93RD AVENUE
City-St-Zip: SUNRISE, FL 33351

I hereby 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 all other like empowered.

SIGNATURE: WALTER P. CAMPBELL PD 04/30/2010

Electronic Signature of Signing Officer or Director Date