

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085559

FILED
Apr 22, 2004
Secretary of State

Entity Name: PREMIERE DURABLE MEDICAL EQUIPMENT, INC.

Current Principal Place of Business:

6802 NW 77 AVENUE
307
MIAMI, FL 33166

New Principal Place of Business:

4421 SW 75 AVE
22
MIAMI, FL 33155

Current Mailing Address:

10397 SW 88TH STREET
W-8
MIAMI, FL 33176

New Mailing Address:

4421 SW 75 AVE
22
MIAMI, FL 33155

FEI Number: 51-0419233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITA, LISSET
6802 N.W. 77 AVE., STE. 307
218
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

CABRE, YASSIEL
4421 SW 75 AVE
22
MIAMI, FL 33155 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: YASSIEL CABRE

04/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: PITA, LISSET
Address: 6802 NW 77 AVE., STE. 307
City-St-Zip: MIAMI, FL 33166

Title: V (X) Delete
Name: ESCOBEDO, JAEL
Address: 6802 NW 77 AVE., STE. 307
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: CABRE, YASSIEL
Address: 4421 SW 75 AVE SUITE # 22
City-St-Zip: MIAMI, FL 33155

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: YASSIEL CABRE

PST

04/22/2004

Electronic Signature of Signing Officer or Director

Date