

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000090294

FILED
Apr 29, 2005
Secretary of State

Entity Name: FLORIDIAN MEDICAL SUPPLY INC.

Current Principal Place of Business:

1140 NE 163RD STREET
SUITE 23
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

1140 NE 163RD STREET
SUITE 23
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 30-0106098 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIMMER, JUAN
21453 NW 39 AVE
MIAMI, FL 33055 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: JUAN DIMMER

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: PD () Delete
Name: DIMMER, JUAN
Address: 21453 NW 39 AVE
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JUAN DIMMER

Electronic Signature of Signing Officer or Director

PD

04/29/2005

Date