

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000112545

FILED
Apr 18, 2003
Secretary of State

Entity Name: ODEKOKI MEDICAL EQUIPMENT CORP.

Current Principal Place of Business:

730 SE 8 ST #109
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

730 SE 8 ST #109
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 52-2382650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALZADILLA, OSVALDO
15271 SW 47 AVE
MIAMI, FL 33054

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: P () Delete
Name: CALZADILLA, OSVALDO
Address: 730 SE 8 ST #109
City-St-Zip: HIALEAH, FL 33010

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: OSVALDO CALZADILLA

P

04/18/2003

Electronic Signature of Signing Officer or Director

Date