

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000120264

FILED
Aug 31, 2007
Secretary of State

Entity Name: EAST COAST RESPIRATORY EQUIPMENT INC.

Current Principal Place of Business:

2274 W 80 STREET, BAY 1
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

2274 W 80 STREET, BAY 1
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 82-0586611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENRIQUEZ, MARIA C
2274 W 80TH STREET, BAY 1
HIALEAH, FL 33016 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

OFFICERS AND DIRECTORS:

Title: P (X) Delete
Name: MARTINEZ, RHEA
Address: 2274 W 80 STREET, BAY 1
City-St-Zip: HIALEAH, FL 33016

Title: SD () Delete
Name: ALVAREZ, RENE
Address: 2274 W 80 STREET, BAY 1
City-St-Zip: HIALEAH, FL 33016

Title: TD () Delete
Name: ENRIQUEZ, MARIA C
Address: 2274 W 80 STREET, BAY 1
City-St-Zip: HIALEAH, FL 33016

Title: D () Delete
Name: ENRIQUEZ, CARLOS A
Address: 2274 W 80 STREET, BAY 1
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PTD (X) Change () Addition
Name: ENRIQUEZ, MARIA C
Address: 2274 W 80 STREET, BAY 1
City-St-Zip: HIALEAH, FL 33016

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RHEA MARTINEZ

P

08/31/2007

Electronic Signature of Signing Officer or Director

Date