2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# P03000005797

Entity Name: ALLIANCE MEDICAL EQUIPMENT SUPPLIES INC.

Current Principal Place of Business:

7311 NW 12 ST STE 3 (FRONT)
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

7311 NW 12 ST STE 3 (FRONT)
MIAMI, FL 33122

New Mailing Address:

FEI Number: 32-0054390 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORIYON, MILKO
7311 NW 12 ST STE 3 (FRONT)
MIAMI, FL 33122

Name and Address of New Registered Agent:

ALVAREZ, ROBERTO
2500 W 56 STREET #1307
HIALEAH, FL 33016

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: ROBERTO ALVAREZ 04/26/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MORIYON, MIKLO
Address: 7311 NW 12 ST STE 3 (FRONT)
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALVAREZ, ROBERTO
Address: 2500 W 56 STREET #1307
City-St-Zip: HIALEAH, FL 33016

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: ROBERTO ALVAREZ P 04/26/2004
Electronic Signature of Signing Officer or Director Date