## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000008329

Entity Name: AMESCO HOSPITAL SUPPLY CO

FILED May 01, 2008 Secretary of State

Littly Na	ine. Alvieso	THOSEITAL SUFFLI CO.			
Current Principal Place of Business:			New Principal Place of Business:		
8550 NW DORAL, F	30 TERRACE FL 331221917	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	30 TERRACE FL 331221917	US			
FEI Number	r: <b>02-</b> 0673890	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
DORAL, F The above in the Stat	30 TERRACE FL 331221917 e named entity e of Florida.	US	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU		nic Signature of Registered Ag	ent	 Date	
Election Ca	nce with s. 607.1	93(2)(b), F.S., the corporation did n ng Trust Fund Contribution ( ).	ot receive the prior notice.	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( OJEDA, IVAN 8550 NW 30 T DORAL, FL 3:		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	STD ( OJEDA, HECT 8550 NW 30 T DORAL, FL 3:	ERRACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: IVAN OJEDA PRES 05/01/2008