## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021315

Entity Name: SEBALEX MEDICAL EQUIPMENT, INC.

FILED Feb 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 10300 SW 72 STREET
 10300 SW 72 STREET

 SUITE #470 B
 SUITE #199

 MIAMI, FL 33173
 MIAMI, FL 33173

Current Mailing Address: New Mailing Address:

 10300 SW 72 STREET
 10300 SW 72 STREET

 SUITE #470 B
 SUITE #199

 MIAMI, FL 33173
 MIAMI, FL 33173

FEI Number: 56-2321712 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GIOLDI, EMIS
8421 NW 8 STREET
5305 SW 149 PL
APARTMENT 201
MIAMI, FL 33126 US

GIOLDI, EMIS
5305 SW 149 PL
MIAMI, FL 33185 US

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: EMIS GIOLDI 02/27/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 GIOLDI, EMIS
 Name:
 GIOLDI, EMIS

 Address:
 8421 NW 8 STREET, #201
 Address:
 5305 SW 149 PL

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33185

I hereby certify that the information supplied with this filing does not qualify for the 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: EMIS GIOLDI PRES 02/27/2007