

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025565

FILED
Apr 30, 2006
Secretary of State

Entity Name: FLORIDA MEDICAL SUPPLY & EQUIPMENT, INC.

Current Principal Place of Business:

1450 MADRUGA AVE.
#302
CORAL GABLES, FL 33146 US

Current Mailing Address:

1450 MADRUGA AVE.
#302
CORAL GABLES, FL 33146

New Principal Place of Business:

66 WEST FLAGLER STREET
#1002
MIAMI, FL 33130 US

New Mailing Address:

66 WEST FLAGLER STREET
#1002
MIAMI, FL 33130

FEI Number: 27-0050031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIDEL, MITCHELL
1450 MADRUGA AVE.
#302
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

ZIDEL, MITCHELL
155 SOUTH MIAMI AVENUE
PH-1D
MIAMI, FL 33130 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: MITCHELL ZIDEL

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ELYASH, YANNI
Address: 3121 VIOLETE LNT STE 368
City-St-Zip: NORTHBROOK, IL 60062

Title: PD () Delete
Name: ZIDEL, MITCHELL
Address: 8004 NW 154TH ST STE 368
City-St-Zip: MIAMI, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ELYASH, YANNI
Address: 3121 VIOLETE LN
City-St-Zip: NORTHBROOK, IL 60062

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 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: MITCHELL ZIDEL

PD

04/30/2006

Electronic Signature of Signing Officer or Director

Date