

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108923

FILED
Apr 30, 2004
Secretary of State

Entity Name: AFFORDABLE DIABETIC SUPPLIES, INC.

Current Principal Place of Business:

7320 SW 22ND PLACE
GAINESVILLE, FL 32607

New Principal Place of Business:

7257 NW 4TH BLVD
PMB #83
GAINESVILLE, FL 32607

Current Mailing Address:

7320 SW 22ND PLACE
GAINESVILLE, FL 32607

New Mailing Address:

7257 NW 4TH BLVD
PMB #83
GAINESVILLE, FL 32607

FEI Number: 05-0524474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOBAR, MARIBEL
7320 SW 22ND PLACE
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

TOBAR, MARIBEL
7257 NW 4TH BLVD
PMB #83
GAINESVILLE, FL 32607 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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TOBAR, MARIBEL
Address: 7320 SW 22ND PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: VP (X) Delete
Name: TOBAR, RODOLFO
Address: 8223 SW 1ST PLACE
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TOBAR, MARIBEL
Address: 7257 NW 4TH BLVD, PMB #83
City-St-Zip: GAINESVILLE, FL 32607

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 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: MARIBEL TOBAR

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date