

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137564

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** ROYAL QUALITY MEDICAL EQUIPMENT, INC.

**Current Principal Place of Business:**

6708 N.W. 72ND AVE.  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

6708 N.W. 72ND AVE.  
MIAMI, FL 33166

**New Mailing Address:**

**FEI Number:** 56-2416269

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUGICA, MARLENE  
12525 SW 9 TER  
MIAMI, FL 33184 US

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

MUGICA, MARLENE  
6708 N.W. 72ND AVE.  
MIAMI, FL 33166 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:** MARLENE MUGICA

02/16/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPS  
**Name:** MUGICA, MARLENE  
**Address:** 6708 NW 72ND AVENUE  
**City-St-Zip:** MIAMI, FL 33166

I hereby 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 all other like empowered.

**SIGNATURE:** MARLENE MUGICA

DPS

02/16/2010

Electronic Signature of Signing Officer or Director

Date