

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000008534

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: LEGACY DME, INC.

## Current Principal Place of Business:

16246 SW 44 TERRACE  
MIAMI, FL 33185

## New Principal Place of Business:

5755 W FLAGLER STREET  
SUITE 207  
MIAMI, FL 33144

## Current Mailing Address:

16246 SW 44 TERRACE  
MIAMI, FL 33185

## New Mailing Address:

5755 W FLAGLER STREET  
SUITE 207  
MIAMI, FL 33144

FEI Number: 13-4271888

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LUCIANA, LUANA T  
16246 SW 44 TERRACE  
MIAMI, FL 33185 US

## Name and Address of New Registered Agent:

IGLESIAS, MANUEL E ESQ  
121 ALHAMBRA PLAZA  
10 FLOOR  
CORAL GABLES, FL 33134 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: MANUEL E IGLESIAS

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LUCIANI, LUANA T  
Address: 16246 SW 44 TERRACE  
City-St-Zip: MIAMI, FL 33185

Title: D (X) Delete  
Name: LUCIANI, SUSANA C  
Address: 1730 SW 99 CT  
City-St-Zip: MIAMI, FL 33185

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: RODRIGUEZ, YAIMARA Y  
Address: 5755 W FLAGLER STREET  
City-St-Zip: CORAL GABLES, FL 33134

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: YAIMARA Y RODRIGUEZ

PDS

04/30/2005

Electronic Signature of Signing Officer or Director

Date