2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000053646

FILED Nov 09, 2007 Secretary of State

Entity Name: LIFELINE MEDICAL & RESPIRATORY EQUIPMENT PROVIDERS, INC.

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

1985 NW 55 AVENUE MARGATE, FL 33063 US

Current Mailing Address: New Mailing Address:

1985 NW 55 AVENUE 1946 MEARS PARKWAY MARGATE, FL 33063 US MARGATE, FL 33063 US

FEI Number: 20-1385676 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:

MONIZ, JANICE
9420 NW 39TH COURT
CORAL SPRINGS, FL 33065 US

MONIZ, JANICE
1946 MEARS PARKWAY
MARGATE, FL 33063 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: JANICE MONIZ 11/09/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 MONIZ, JANICE
 Name:

 Address:
 9420 NW 39TH COURT
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33065 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JANICE MONIZ PRES 11/09/2007