

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000062717

**FILED**  
**Oct 11, 2006**  
**Secretary of State**

**Entity Name:** UNITED MEDICAL RESPIRATORY EQUIPMENT & SUPPLIES, INC.

**Current Principal Place of Business:**

2315 NW 27TH AVE  
MIAMI, FL 33142

**New Principal Place of Business:**

2183 SW 1 STREET  
MIAMI, FL 33135

**Current Mailing Address:**

2315 NW 27TH AVE  
MIAMI, FL 33142

**New Mailing Address:**

2183 SW 1 STREET  
MIAMI, FL 33135

**FEI Number:** 20-1003165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALVAREZ ACOSTA, ESTELA  
2315 NW 27TH AVE  
MIAMI, FL 33142 US

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

SANCHEZ, RAFAEL  
2183 SW 1 STREET  
MIAMI, FL 33135 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: RAFAEL SANCHEZ

10/11/2006

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:**

Title: PVST ( ) Delete  
Name: ALVAREZ ACOSTA, ESTELA  
Address: 2315 NW 27TH AVE  
City-St-Zip: MIAMI, FL 33142

Title: D ( ) Delete  
Name: ALVAREZ ACOSTA, ESTELA  
Address: 2315 NW 27TH AVE  
City-St-Zip: MIAMI, FL 33142

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVST (X) Change ( ) Addition  
Name: SANCHEZ, RAFAEL  
Address: 2183 SW 1 STREET  
City-St-Zip: MIAMI, FL 33135

Title: D (X) Change ( ) Addition  
Name: SANCHEZ, RAFAEL  
Address: 2183 SW 1 STREET  
City-St-Zip: MIAMI, FL 33135

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: RAFAEL SANCHEZ

PRES

10/11/2006

Electronic Signature of Signing Officer or Director

Date