## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000086978

City-St-Zip:

Entity Name: SUNSHINE STATE MEDICAL SUPPLY, INC

PEMBROKE PINES, FL 33023 US

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
5951 NW 151 ST., BAY 3 MIAMI LAKES, FL 33014				
Current Mailing Address:		New Mailing Address	New Mailing Address:	
5951 NW 151 ST., BAY 3 MIAMI LAKES, FL 33014				
FEI Number: 20-1197938	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:				
REYES, ROBERTO 6930 SW 9TH ST. PEMBROKE PINES, FL :	33023 US			
The above named entity s in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: P () Name: REYES, ROBER Address: 6930 SW 9TH S		Title: Name: Address:	( ) Change ( ) Addition	

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: ROBERTO REYES PRES 04/30/2009