

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000110114

FILED
Apr 26, 2007
Secretary of State

Entity Name: R & L MEDICAL ENTERPRISES INC.

Current Principal Place of Business:

12157 W LINEBAUGH AVE
#129
TAMPA, FL 33626

New Principal Place of Business:

Current Mailing Address:

12157 W LINEBAUGH AVE
#129
TAMPA, FL 33626

New Mailing Address:

FEI Number: 20-1515396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACCLELLAN, ROGER
12157 W LINEBAUGH AVE
#129
TAMPA, FL 33626 US

Name and Address of New Registered Agent:

MACCLELLAN, RYAN
12157 W LINEBAUGH AVE
#129
TAMPA, FL 33626 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: RYAN MACCLELLAN

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MACCLELLAN, RYAN
Address: 12157 W LINEBAUGH AVE #129
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: RYAN MACCLELLAN

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date