## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000111808

Address:

City-St-Zip:

8121 JOLLY HARBOUR CT.

WELLINGTON, FL 33414

Entity Name: DIABETES SELF MANAGEMENT SUPPLIES, INC

FILED Apr 24, 2008 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place of Business:		
12230 FO	LLINGTON PF REST HILL BL TON, FL 3341				
Current Mailing Address:			New Mailing Address	<b>::</b>	
12230 FO	LLINGTON PF REST HILL BL TON, FL 3341				
FEI Number	: 20-1440379	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
WELLING	INTRY GOLF I TON, FL 3341	4 US	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FONDA, JERR	Y GOLF DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	VP ( DEL VALLE, A	) Delete NTHONY M	Title: Name:	( ) Change ( ) Addition	

Address:

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: ANTHONY DEL VALLE VP 04/24/2008