

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000131863

Entity Name: LILI MEDICAL SUPPLIES INC

FILED  
Jul 18, 2005  
Secretary of State

## Current Principal Place of Business:

4143 SW 74 CT  
F  
MIAMI, FL 33155 US

## Current Mailing Address:

4143 SW 74 CT  
F  
MIAMI, FL 33155 US

FEI Number: 20-1655198

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## New Principal Place of Business:

8181 NW 36 STREET  
1007  
DORAL, FL 33166 US

## New Mailing Address:

8181 NW 36 STREET  
1007  
DORAL, FL 33166 US

## Name and Address of Current Registered Agent:

LLAMPAY, FERNANDO J  
4143 SW 74 CT  
F  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

LLAMPAY, FERNANDO J  
8181 NW 36 STREET  
1007  
DORAL, FL 33166 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: FERNANDO J LLAMPAY

07/18/2005

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: P ( ) Delete  
Name: LLAMPAY, FERNANDO J  
Address: 4143 SW 74 CT - SUITE F  
City-St-Zip: MIAMI, FL 33155 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LLAMPAY, FERNANDO J  
Address: 8181 NW 36 STREET - SUITE 1007  
City-St-Zip: DORAL, FL 33166 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FERNANDO J LLAMPAY

P

07/18/2005

Electronic Signature of Signing Officer or Director

Date