

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141615

FILED
Feb 07, 2005
Secretary of State

Entity Name: ASV MEDICAL SUPPLIES, INC.

Current Principal Place of Business:

12934 S.W. 133 COURT
MIAMI, FL 33186

New Principal Place of Business:

12934 S.W. 133 COURT - SUITE A
MIAMI, FL 33186

Current Mailing Address:

12934 S.W. 133 COURT
MIAMI, FL 33186

New Mailing Address:

12934 S.W. 133 COURT - SUITE A
MIAMI, FL 33186

FEI Number: 20-1892834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARTINEZ, LESTER
15741 S.W. 143 AVENUE
MIAMI, FL 33177 US

Name and Address of New Registered Agent:

BALMASEDA, LECTY
12934 SW 133 COURT - SUITE A
MIAMI, FL 33186 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: LECTY BALMASEDA

02/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTINEZ, LESTER
Address: 15741 S.W. 13 AVENUE
City-St-Zip: MIAMI, FL 33177

Title: VP,S () Delete
Name: JURY, ENRIQUE
Address: 11857 S.W. 99TH STREET
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BALMASEDA, LECTY
Address: 12934 SW 133 COURT - SUITE A
City-St-Zip: MIAMI, FL 33186

Title: VP,S (X) Change () Addition
Name: BUSTAMANTE, MIREYA
Address: 11857 S.W. 99TH STREET
City-St-Zip: MIAMI, FL 33186

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: LECTY BALMASEDA

P

02/07/2005

Electronic Signature of Signing Officer or Director

Date