

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162430

FILED  
May 03, 2005  
Secretary of State

Entity Name: IVES DAIRY MEDICAL SUPPLY INC.

## Current Principal Place of Business:

190 NE 199 STREET STE 104  
NORTH MIAMI BEACH, FL 33179

## New Principal Place of Business:

## Current Mailing Address:

190 NE 199 STREET STE 104  
NORTH MIAMI BEACH, FL 33179

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHATKHIN, MARK  
190 NE 199 STREET STE 104  
NORTH MIAMI BEACH, FL 33179 US

## Name and Address of New Registered Agent:

SHATKHIN, MIRA  
190 NE 199 STREET STE 104  
NORTH MIAMI BEACH, FL 33179 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: MIRA SHATKHIN

05/03/2005

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: D ( ) Delete  
Name: SHATKHIN, MARK  
Address: 190 NE 199 STREET STE 104  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SHATKHIN, MIRA  
Address: 190 NE 199 STREET STE 104  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: MIRA SHATKHIN

D

05/03/2005

Electronic Signature of Signing Officer or Director

Date