

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000006328

FILED
Jan 09, 2007
Secretary of State

Entity Name: FAMILY CARE MEDICAL EQUIPMENT, CORP.

Current Principal Place of Business:

10300 SUNSET DR.
470-E
MIAMI, FL 33173

New Principal Place of Business:

10300 SUNSET DRIVE
470-E
MIAMI, FL 33173

Current Mailing Address:

10300 SUNSET DR.
470-E
MIAMI, FL 33173

New Mailing Address:

10300 SUNSET DRIVE
470-E
MIAMI, FL 33173

FEI Number: 20-2221387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEL TORO, ANA NORMA
10300 SUNSET DR. # 470-E
MIAMI, FL 33171 US

Name and Address of New Registered Agent:

DEL TORO, ANA N
10300 SUNSET DRIVE
470-E
MIAMI, FL 33173 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: ANA N. DELTORO

01/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DEL TORO, ANA NORMA
Address: 10300 SUNSET DR. # 470-E
City-St-Zip: MIAMI, FL 33171

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DEL TORO, ANA N
Address: 10300 SUNSET DR. # 470-E
City-St-Zip: MIAMI, FL 33173

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: ANA N. DELTORO

PD

01/09/2007

Electronic Signature of Signing Officer or Director

Date