

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000007543

FILED
Jul 31, 2006
Secretary of State**Entity Name:** GREAT MEDICAL EQUIPMENTS, INC.**Current Principal Place of Business:**4355 W 16 AVE
STE 205B
HIALEAH, FL 33012**New Principal Place of Business:****Current Mailing Address:**4355 W 16 AVE
STE 205B
HIALEAH, FL 33012**New Mailing Address:**335 SOUTH KROME AVENUE
SUITE # 104
FLORIDA CITY, FL 33034**FEI Number:** 32-0137132**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SERRANO, CRISTOBAL
2900 NW 18TH AVE. #10G
MIAMI, FL 33142 US**Name and Address of New Registered Agent:**GONZALEZ, ELIO S
9455 SW 42ND. STREET
MIAMI, FL 33165 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: ELIO S. GONZALEZ

07/31/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PVST () Delete
Name: SERRANO, CRISTOBAL
Address: 4355 W 16 AVE
City-St-Zip: HIALEAH, FL 33012**Title:** D () Delete
Name: SERRANO, CRISTOBAL
Address: 4355 W 16 AVE
City-St-Zip: HIALEAH, FL 33012**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PVST (X) Change () Addition
Name: GONZALEZ, ELIO S
Address: 9455 SW 42ND. STREET
City-St-Zip: MIAMI, FL 33165**Title:** D (X) Change () Addition
Name: GONZALEZ, ELIO S
Address: 9455 SW 42ND. STREET
City-St-Zip: MIAMI, FL 33165

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: ELIO S. GONZALEZ

PVST

07/31/2006

Electronic Signature of Signing Officer or Director

Date