

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000091791

FILED
Jul 30, 2007
Secretary of State

Entity Name: XUNIX MEDICAL EQUIPMENT INC.

Current Principal Place of Business:

3600 S. STATE. ROAD 7 (441)
SUITE 44
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

3600 S. STATE. ROAD 7 (441)
SUITE 44
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 36-4576308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REGISTRE, GARCENDI G
6749 SW 27TH COURT
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REGISTRE, GARCENDI G
Address: 6749 SW 27TH COURT
City-St-Zip: MIRAMAR, FL 33023

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REGISTRE, GARCENDI G
Address: 6749 SW 27TH COURT
City-St-Zip: MIRAMAR, FL 33023 US

Title: VP () Change (X) Addition
Name: REGISTRE, MIRLANDE
Address: 6749 SW 27TH COURT
City-St-Zip: MIRAMAR, FL 33023 US

Title: O () Change (X) Addition
Name: DELIARD, ARIOST
Address: 6749 SW 27TH COURT
City-St-Zip: MIRAMAR, FL 33023

I hereby certify that the information supplied with this filing does not qualify 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: GARCENDI REGISTRE

P

07/30/2007

Electronic Signature of Signing Officer or Director

Date