

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000130652

FILED
Jan 17, 2007
Secretary of State

Entity Name: TOP CHOICE MEDICAL SUPPLIES, INC.

Current Principal Place of Business:

1700 NW 15 STREET
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

1700 NW 15 STREET
MIAMI, FL 33125

New Mailing Address:

FEI Number: 20-3576017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, MARTHA M
1700 NW 15 STREET
MIAMI, FL 33125 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: GONZALEZ, MARTHA M
Address: 2631 NW 87 STREET
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARTHA M. GONZALEZ

PRES

01/17/2007

Electronic Signature of Signing Officer or Director

Date