

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000128964

FILED
Jul 16, 2008
Secretary of State

Entity Name: VANGUARD MEDICAL SUPPLY, INC.

Current Principal Place of Business:

5340 N. FEDERAL HWY, STE. 204
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

621 NW 53RD ST.
SUITE 240
BOCA RATON, FL 33487

Current Mailing Address:

5340 N. FEDERAL HWY, STE. 204
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

621 NW 53RD ST.
SUITE 240
BOCA RATON, FL 33487

FEI Number: 22-3973169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

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: DPS () Delete
Name: WAYNE, BRETT
Address: 5340 N. FEDERAL HWY, STE. 204
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: WAYNE, BRETT
Address: 621 NW 53RD ST. SUITE 240
City-St-Zip: BOCA RATON, FL 33487

Title: VP () Change (X) Addition
Name: PETER, ERICSON
Address: 621 NW 53RD ST. SUITE 240
City-St-Zip: BOCA RATON, FL 33487

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: BRETT WAYNE

CEO

07/16/2008

Electronic Signature of Signing Officer or Director

Date