

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P07000135191 1. Entity Name MED-A-FIX MOBILE INCORPORATED						FILED 08 SEP 26 AM 9:58 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 3816 RANCHO ROAD EAST JACKSONVILLE, FL 32221				Mailing Address 3816 RANCHO ROAD EAST JACKSONVILLE, FL 32221			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country		Zip		Country	
4. FEI Number				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent MCCALL, CONNIE A 3816 RANCHO ROAD EAST JACKSONVILLE, FL 32221				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>							
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>			
\$5.00 May Be Added to Fees				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS				11. ADDITIONS / DELETIONS OF OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCALL, CONNIE A 3816 RANCHO ROAD EAST JACKSONVILLE, FL 32221			TITLE NAME STREET ADDRESS CITY-ST-ZIP	President / Director McCall, Connie A 3816 Rancho Rd East Jacksonville, FL 32221		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCCALL, HALEY D 3816 RANCHO ROAD EAST JACKSONVILLE, FL 32221			TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President / Secretary Sondra D. Miller 5425 Gill Davis Rd Glen St Mary FL 32040		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D - CADANCE A. MCGILL 3816 RANCHO RD EAST JAX, FL 32221		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D - HALEY D. MCGILL 3816 RANCHO RD EAST JAX, FL 32221		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	500136517225 10/01/08--01017--007 ***150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <u>Connie A. McCall</u>				<u>09/24/08 (904) 207 4543</u>			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>			

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September 25, 2008

Florida Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

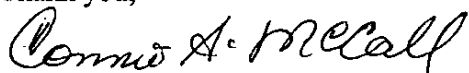
To Whom It May Concern:

I never received anything from the Florida Division of Corporations stating that I needed to renew my business: Med•A•Fix Mobile Inc., by May 1, 2008.

Enclosed is my 2008 Corporation Annual Report along with a check for \$150. Since I never received anything from you, please accept the check for payment in full and please pardon the late fee of \$400 this one time.

I now know when it is due every year and will make sure that my secretary takes care of it within the appropriate time.

Thank you,



Connie McCall
President, Med•A•Fix Mobile Inc.
3816 Rancho Road East
Jacksonville, FL 32221
(904) 207-4543