2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 17, 2009
Secretary of State

DOCUMENT# P08000046257

Entity Name: MEDICAL GAS SPECIALIST, INC.

Current Principal Place of Business:

3131 JASPER WAY
MIRAMAR, FL 33025

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 161089
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 06-1750711 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALMODOVAR, RALPH SR.
3131 JASPER WAY
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

ALMODOVAR, NANCY
3131 JASPER WAY
MIRAMAR, FL 33025 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: NANCY ALMODOVAR 09/17/2009
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: P ( ) Delete
Name: ALMODOVAR, RALPH SR.
Address: 3131 JASPER WAY
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALMODOVAR, NANCY
Address: 3131 JASPER WAY
City-St-Zip: MIRAMAR, FL 33025

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: NANCY ALMODOVAR P 09/17/2009
Electronic Signature of Signing Officer or Director Date