

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000073320

FILED
Apr 22, 2009
Secretary of State

Entity Name: ACTION HEALTHCARE PRODUCTS, INC.

Current Principal Place of Business:

1101 NO. KELLER RD., SUITE E.
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

1101 NO. KELLER RD., SUITE E.
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 59-2095427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BURROWS, ROBERT
1101 NO. KELLER RD., SUITE E.
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

KAPLAN, WARREN
1101 NO. KELLER RD., SUITE E.
ORLANDO, FL 32810 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: WARREN KAPLAN

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: KAPLAN, RONALD S
Address: 1101 NO. KELLER RD., SUITE E.
City-St-Zip: ORLANDO, FL 32810

Title: DCFO (X) Delete
Name: BURROWS, ROBERT
Address: 1101 NO. KELLER RD., SUITE E.
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CRO (X) Change () Addition
Name: KAPLAN, WARREN
Address: 1101 NO. KELLER RD., SUITE E.
City-St-Zip: ORLANDO, FL 32810

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

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: WARREN KAPLAN

CRO

04/22/2009

Electronic Signature of Signing Officer or Director

Date