

2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P09000065617

Entity Name: ASE MEDICAL SUPPLIES, INC.

FILED
Oct 24, 2012
Secretary of State

Current Principal Place of Business:

406 FAIRPOINT DR
GULF BREEZE, FL 32561

New Principal Place of Business:

Current Mailing Address:

406 FAIRPOINT DR
GULF BREEZE, FL 32561

New Mailing Address:

FEI Number: 27-0734799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NILSSEN, ALLISON D
406 FAIRPOINT DR
GULF BREEZE, FL 32561 US

Name and Address of New Registered Agent:

FISHER, ANDREW
197 CAMELIA STREET
GULF BREEZE, FL 32451 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: ANDREW FISHER

10/24/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPS
Name: NILSSEN, ERIK C
Address: 406 FAIRPOINT DR
City-St-Zip: GULF BREEZE, FL 32561

Title: DVPT
Name: NILSSEN, ALLISON D
Address: 406 FAIRPOINT DR
City-St-Zip: GULF BREEZE, FL 32561

Title: DVP
Name: FISHER, ANDREW
Address: 197 CAMELIA STREET
City-St-Zip: GULF BREEZE, FL 32451

I hereby 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 all other like empowered.

SIGNATURE: ERIK C. NILSSEN

DPS

10/24/2012

Electronic Signature of Signing Officer or Director

Date