

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000007826

FILED
Jan 03, 2007
Secretary of State

Entity Name: PARAGON MEDICAL SUPPLIES, INC.

Current Principal Place of Business:

10918 WILES RD
CORAL SPRINGS, FL 33076 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 770187
CORAL SPRING, FL 33077 US

New Mailing Address:

FEI Number: 65-0401039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, MARTIN
11290 NW 1ST PLACE
CORAL SPRINGS, FL 33077 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: COLE, MARTIN
Address: 11290 NW 1ST PALCE
City-St-Zip: CORAL SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: COLE, MARTIN
Address: 11290 NW 1ST PALCE
City-St-Zip: CORAL SPRINGS, FL 33071 US

I hereby certify that the information supplied with this filing does not qualify for the 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: M COLE/PRES

MR

01/03/2007

Electronic Signature of Signing Officer or Director

_____ Date