## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000026370 (5)

A PLUS MEDICAL EQUIPMENT & SUPPLY, INC.

Principal F	Place of	Business
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Mailing Address

510 WEST LANTANA ROAD LANTANA FL 33462 510 WEST LANTANA ROAD LANTANA FL 33462-1626

## FILED May 08 1997 8:00am Secretary of State



LANTANA FL 3	3452	LANIANA PL 33962-1626							
						3. Date Incorporated or Qualified 04/08/1993		ite of Last F 14/1996	Report
	ace of Business	2a. Mailing Address				4. FEI Number		<b>⊢-</b> +-	pplied For
21		26				65-0400467		<del> </del>	lot Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State	)	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28	• • • • • • •			Trust Fund Contribution			l to Fees
Zip 24	Country 25	Zip 29	00ur	ntry		8. This corporation has tiability for in		No under s	s. 199.032,
<del>47</del>	9. Name and Address of Curren		1001			10. Name and Address of New Re			
BLE	DSOE, DAVID V			81	Name				
	WEST LANTANA RD.		-	82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)		
	TANA FL 33462			V.	Olicel Adi	areas (1.6. box Normber to Nor Nocopied			
				83					
ı			1	84	City		FL	<b>85</b> Zip	Code
office or re agent. I at SIGNATURE.	egistered agent, or both, in the State m familiar with, and accept the oblig-	of Florida. Such change was a ations of, Section 607.0505, Flo	authorizec orida Stati	i by t utes.	he corpor	rporation submits this statement for the p ation's board of directors. I hereby accep	ourpose of of the appo	changing ointment as	its registered s registered
12.	Signature, typed or printed name of registered age OFFICERS AN	<del></del>	13.	Agent	s gnature req	ured when reinstaling)  ADDITIONS/CHANGES TO OFFIC	DATE ERS AND	DIBECTO	RS IN 12
TITLE	D	DELETE	1.1.10	LĒ		113511101101011111111111111111111111111		☐ Change	Addition
NAME	BLEDSOE, KAREN C		1.2 NA	ME					
STREET ADDRESS	4640 BARRETT ST.		1.8 S1	REE1 AC	DDRESS				ı
CITY-ST-ZIP	DELRAY BEACH FL 33445		1.4 CR	Y-81-	ZIP				ı
TITLE	D	DELETE	2.1 111	LE				Change	Addition
NAME	BLEDSOE, DAVID V		2.2 NA	ME					
STREET ADDRESS	4840 BARRETT ST.		2.8 ST	REET A	DDRESS				
CITY-ST-ZIP	DELRAY BEACH FL 33445		2.i4 CI		- ZIP				
TITLE	D	☐ DELETE	3.4 T/1		ĺ			Change	Addition
NAME	BLEDSOE, RANDOLPH W		3.₽ NA		İ		14.7		
STREET ADDRESS	4640 BARRETT ST.				DDRESS				
CITY-ST-ZIP TITLE	DELRAY BEACH FL 33445	DELFTE	3 #. CI 4.4 TIT		- ZIP			Change	Addition
NAME		בן טננות	4.1 III					L.J Ondrigo	L_ Notified
STREET ADDRESS					DDRESS				
CITY-ST-ZIP				1Y-SI-					
TITLE		☐ DE&F1E	51 111					Change	Addition
NAME		•	5 2 NA					·	
STREET ADDRESS					DDRESS				
CITY-ST-ZIP			5.4 CI	IY-\$1-	ZIP				
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE.	6.1 1/1					Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	REET A	DDRESS				
CITY-ST-ZIP				1Y-ST-					
informatio	in indicated on this annual report or :	supplemental annual report is t	true and a	ocur	ate and th	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega oort as required by Chapter 607, Florida S	al effect as	s if made u	inder oath: that