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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

N ANDRONAL BID BALEN AFRIK ANDRI ANGER NOTEN ANGEN ARRON JERRE GRAND HIND DELL INDRI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000033235 (1)

MEDEQUIP INTERNATIONAL, INC.

Principal Place of Business Mailing Address										i 11140 11 020 1441	J1 E111 (EE)	
13829 PALM G	ROVE PLACE	13	13829 PALM GROVE PLACE									
SUITE 100			SUITE 100									
PALM BEACH GARDENS FL 33418			PALM BEACH GARDENS FL 33418-6977					3. Date Incorporated or Qualified	Tax Dr	ate of Last R	2000rd	
								05/07/1993		12/1996	teport	
2. Principal Place of Business			2a, Mailing Address					4. FEI Number	Applied For			
21]			6 Colta Ant Honor					65-0418764	Not Applicable			
Sulte, Apt. #, etc.			Suite, Apt. #, etc.					5, Certificate of Status Desired		•	Additional	
22] City & State			7 City & State						· · · · · · · · · · · · · · · · · · ·	equired		
23			B				Election Campaign Financing Trust Fund Contribution			May Be to Fees		
Zip	Country		Zip Cou									
24	25	29		30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No				
9. Name and Address of Current							10. Name and Address of New Registered Agent					
HUD	SON, ROBERT F JR.				81	Na	me					
701 BRICKELL AVENUE			82 Street			Str	ont Addre	ddress (P.O. Box Number is Not Acceptable)				
SUITE 1600						3,11	set Addre	אומפאלון יאי ולפיםוושוען אימל יאי ול פפסוויוין אמל יאי ול פפסוויין				
MIAMI FL 33131												
					84	Cit				85 Zip	Code	
•					-	011	,		FL	165 Zip	C006	
11. Pursuant t	to the provisions of Sections 607.05	02 and 6	607.1508, Florida Statut	tes, the a	bovo	c-nan	ned corpo	oration submits this statement for the pon's board of directors. I hereby accept	o esogruc	changing i	ts registered	
agent. I a	n familiar with, and accept the oblig	gations o	of, Section 607.0505, Fl	orida Sta	tutes	y une i S.	corporatio	on's board or directors. Thereby accep	or me app	omunem as	registered	
SIGNATURE												
	Signature, typed or printed name of registered ag	·······			d Age	ont sign	alure require	d when reinstaling)	DATE			
12.	OFFICERS AN	ND DIRE		18.				ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	D Hogan, Frank J		☐ DELETE	1.11						Change	Addition	
JASSA BALLI OROUP BLACE OF			E 400		I.2 NAME							
DALM DEACH CARRENS EL CO			10			1.3 STREET ADDRESS						
CITY-ST-ZIP TITLE	D		DELETE	211		ST-ZIP				Change	Addition	
NAME	DENDER, MARK			- 1						C Change	□ Vonkion	
STREET ADDRESS 13829 PALM GROVE PLACE, SU			The state of the s		2 8 NAME 2 8 STREET ADDRESS		.00					
CITY-ST-ZIP PALM BEACH GARDENS FL 334			10				.55					
TITLE	THE DESCRIPTION OF THE PROPERTY OF THE PROPERT		DELETE	3.1 T		ST-ZIP				Change	Addition	
NAME			_	321			Ì	·				
STREET ADDRESS						i addri	ss					
CITY-ST-ZIP						ST - 71P						
TITLE	· · · · · · · · · · · · · · · · · · ·		DELETE	4.1 1		<u> </u>				Change	Addition	
NAME				4 21	AME					-		
STREET ADDRESS				4.3 S	TREET	I ADDRI	SS					
CITY-ST-ZIP						ST - ZIP						
TITLE			DELETE	5.1 T	ITLE					Change	Addition	
NAME				5.2 N	IAME							
STREET ADDRESS				5.8 9	TREET	T ADDRI	.ss					
CITY-ST-ZIP				5.4 0	iiiy-s	ST-ZIP						
TITLE			DELETE	6.1 T	ITLE					Change	Addition	
NAME				6.21	AME							
STREET ADDRESS				6.8 9	TREET	t addri	SS					
CITY-ST-ZIP						ST - ZIP						
14. I do heret	by certify that the information supplied indicated on this appual report or	ed with the	his filing does not qual	ify for the	exe	emption of the contract of the	on stated	in Section 119.07(3)(i), Florida Statute my signature shall have the same lega	s. Fluither	r certify that	the	
I am an of	flicer or director of the corporation of	or the rec	ver or trustee empoy	wered to	exec	oute t	nis report	as required by Chapter 607, Florida \$	itatutes; a	nd that my	name	
appears ii	n Block 12 or Blook 1391 changes	or op an	ittachment with an ad	dress.								