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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000033235 (1)

MEDEQUIP INTERNATIONAL, INC.

Principal Place of Business Mailing Address 13829 PALM GROVE PLACE 13829 PALM GROVE PLACE SUITE 100 SUITE 100 DO NOT WRITE IN THIS SPACE PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 3. Date Incorporated or Qualified 05/07/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65:0418764 26 Not Applicable Suite, Apt. #. etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HUDSON, ROBERT F JR. 701 BRICKELL AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1600** 83 **MIAMI FL 33131** 84 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 11 TITLE Change HOGAN, FRANK J NAME 1.2 NAME 13829 PALM GROVE PLACE, SUITE 100 STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH GARDENS FL 33418 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE Change DENDER, MARK 2.2 NAME 13829 PALM GROVE PLACE, SUITE 100 STREET ADDRESS 2.3 STREET ADDRESS PALM BEACH GARDENS FL 33418 CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change Addition 61 TITLE NAME 62 NAME STREET ADDRESS **63 STREET ADDRESS**

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in

officer or director of the corporation or the receiver or trustee Block 12 or Block 13 if changed to on an attachment with an

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4/13/98

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FILED

Apr 28 1998 8:00am

Secretary of State