FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED
APPROVED AND FILED

95 MAY -1 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000041935 (6)**

1. Corporate Name
DIABETIC SUPPLY FOUNDATION, INC.

Principal Place of Business
3923 LAKE WORTH RD
SUITE 103
LAKE WORTH FL 33461

Mailing Address
3923 LAKE WORTH RD
SUITE 103
LAKE WORTH FL 33461

Date Filed With This State
3. Date Incorporated or Qualified: 06/09/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 1216 U.S. Highway 1
Suite, Apt. #
22 Suite D
City, State
23 North Palm Beach, FL
Zip
24 33408
Country
25

2a. Mailing Address
26 1216 U.S. Highway 1
Suite, Apt. #
27 Suite D
City, State
28 North Palm Beach, FL
Zip
29 33408
Country
30

4. FEI Number: 65-0413000 — Applied For / Not Applicable

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees

8. The corporation is subject to, or elects to be subject to, section 607.0901 Florida Statute [X] Yes [ ] No

9. Name and Address of Current Registered Agent
ESKELINEN ANNE
3923 LAKE WORTH RD
SUITE 103
LAKE WORTH FL 33461

10. Name and Address of New Registered Agent
81 Name:
82 Street Address (P.O. Box Number Not Acceptable):
83 1216 U. S. Highway 1, SUITE D
84 City: North Palm Beach FL
85 Zip Code: 33408

11. [illegible]

12. [illegible]
P
ESKELINEN ANNE
3923 LAKE WORTH RD., SUITE 103
LAKE WORTH FL 33461

13. [illegible]
[X] Type [ ] Add
1216 U.S. Highway 1, Suite D
North Palm Beach, Fl 33408

14. [illegible]

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ANNE ESKELINEN

04/25/95 (407-627-7404)
Date Signed

0370684 CP