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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1006

DOCLIN									
1. Corporation	MENT # P930	00041	935 (6	3)					
DIABET	TIC SUPPLY FOUNDATIO	ON, INC.							
Principal Place of Business Mailing Address						- (10013501: 110 18301 18111 00111 1	BOOLOUIU BOHLU		TO HILLY SENI 1881
	1216 U S HWY 1		1216 U S HWY 1 STE D NORTH PALM BEACH FL 33408 US						
STE D North Palm Beach Fl 33408 US									
									of Last Report 5/01/1995
2. Principal Pla	ce of Business	2a. Mai	ling Address			4. FEI Number			Applied For
1		26				65-0413000			Not Applicable
Suite, Apt. #	, etc.	27 Suit	le, Apt. #, etc.			5. Certificate of Status Desired			Additional
City & State			& State			6. Election Campaign Financing			Required
3		28				Trust Fund Contribution	['] □		O May Be d to Fees
Zip	Country	Zıp		Cour	ntry	8. This corporation has liability	for intangible ta		
4	25	29		30		Florida Statutes	res □No		
	9. Name and Address of Curr	rent Registered	d Agent			10. Name and Address of New	v Registered	Agent	
FOVE: IN	ITAL ANNIT				81 Name				
	ien anne s hwy 1., ste d				82 Street Add	ress (P.O. Box Number is Not Accep	table)		
SUITE 16				-	83				
	PALM BEACH FL 33408			L					
11011111	TACM DESCRIPTE GOTOD				84 City		FL	85 Zij	p Code
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11. Pursuant to	the provisions of Sections 607.05	502 and 607.150	08, Florida Statuti	es, the abov	ve-named corpo	ration submits this statement for the	purpose of cha	anging its r	egistered office
or registere	od agent, or both, in the State of Fi	iorida. Such cha	nge was authoriz	ed by the c	ve-named corpo orporation's boa	ration submits this statement for the ird of directors. I hereby accept the a	purpose of cha ppointment as	anging its r registered	egistered office l agent. I am
or registere familiar with	o the provisions of Sections 607.05 id agent, or both, in the State of Fi n, and accept the obligations of, Se	iorida. Such cha	nge was authoriz	ed by the c	ve-named corpo orporation's boa	ration submits this statement for the ard of directors. I hereby accept the a	purpose of cha ppointment as	anging its r registered	egistered office l agent. I am
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SIGNATURE;

04/12/96 407-627-7404
Date Destrice Proces