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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000042913

1. Corporation Name

R & R MEDICAL MARKETING, INC.

						j				1 111 111 1 11 111 111 1 11	
Principal Place of Business			Mailing Address				I SANSTANT TIL TRIBB 11511 BRITT ART	EL MUTIT MATERIAL	810 (1010 1010)	14 800 1111 1 80 1	
2225-GW-27TH TERRACE		2225 (2225 SW 27TH TERRAGE								
MIAMI FL 33175-→			MIAMI FL 33175				DO NOT WRITE IN THIS SPACE				
US			uc			-	3. Date Incorporated or Qualified				
						1	06/17/1993				
a Principal D	lace of Business	22 M	ailing Address				4 FEI Number		Apr	olied For	į
	SW 136 CT	26	2992 SW 1	36 CT	ŗ		65-0418395			Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.						\$8.75 A	dditional	
22 Min i, Pt. 33170			1				5. Certifcate of Status Desired		Fee Re	quired	
City & State		27 C	ity & State		ليكدنن		6. Election Campaign Financing		\$5.00	May Be	ىد. ا
23 Miam	i, Florida	28 N	liami, FF1	orida	à	ļ	Trust Fund Contribution	Ц	Added to	Fees	i
Zip	Country	Zi	p	Country	,		8. This corporation owes the curre			_	
24 3317	5 25 US	29	33175 3	O US:	3		Personal Property Tax.			□No	
	9. Name and Address of Current	Register	ed Agent				10. Name and Address of New R	egistered A	gent	_	
	EV BIOEI DA O			81	Name R	Rice	1da G Nalley				
	EY, RICELDA C			82	Street	Addres	is (P.O. Box Number is Not Accepta	ble)			
2225 SW 27TH-TERR					2	992	SW 136 CT			•	
MIAN	Al FL 33175			83							l
				84	City				85 Zip C	ode	l
					M	iam	i,	<u>FL</u>	331		
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.	1508, Florida Statutes	, the abov	e-named	corpor	ation submits this statement for the	purpose of c	hanging its	registered	
office or r	egistered agent, or both, in the State of p familiar with, and accept the obligation	r Flonda. ons of, Se	ection 607.0505, Florid	la Statutes	are corpi i.	oradon	s board of directors. Thereby accep	t tile appoin	unerit de reş	gioto: ou	
SIGNATURE		1-11	Rićelda	CG Na	11e	y 1	President 4-	10-99			
SIGNATORE	Signature, typed or printed name of registered agents			egistered Age	nt signature i	required w	nion romationally				1
12.	OFFICERS AND	DIRECT		13.			ADDITIONS/CHANGES TO OFF	FICERS AND	DIRECTO Change	RS IN 12 Addition	l
TITLE	D		☐ DELETE	1.1 TITLE		PD			Change		ĺ
NAME .	NALLEY, RIGELDA G			1.2 NAME		R1	celda G Nalley 92 SW 136 CT				
STREET ADDRESS	2225 S.W. 27TH TERRAGE			B.	TADDRESS		ami, FL 33175				
CITY-ST-ZIP	MIAMI-FL 33138		Deserte	1.4 CITY-S	T-ZIP			•	☐ Change	Addition	
TITLE			☐ DELETE	2.1 TITLE					☐ Orial ige	☐ Yaqanon	
NAME				2.2 NAME						,	ĺ
STREET ADDRESS				1	TADDRESS						ĺ
CITY-ST-ZIP		 -	DELETE:	2. 4 CITY-	ST-ZIP	- 5-5			☐ Change =	- Addition	=
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NAME				3.2 NAME							
STREET ADDRESS				1	TADDRESS						ı
CITY-ST-ZIP			DELETE	3.4. CITY-:	ST-ZIP				Change	Addition	ı
TITLE			☐ DELETE	4.1 TITLE					□ Onlange		ĺ
NAME				4. 2 NAME							ĺ
STREET ADDRESS					TADDRESS						ĺ
CITY-ST-ZIP			☐ DELETE	4.4 CITY- 8	ir-ZIP	+			☐ Change	Addition	
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NAME					TADORESS						ĺ
STREET ADDRESS				5.4 CITY-S							
CITY-ST-ZIP			☐ DELETE	6.1 TITLE	11-611	 			Change	Addition	ĺ
TITLE			□ NETE IE	6.2 NAME							
NAME					エ トラハカニシャ						l
STREET ADDRESS				0.3 3 IKEE	T ADDRESS	' [1

14. I hereby 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. LOS OURICEIda G Nalley 4-10-99 (305)228 6449 SIGNATURE:

FILED

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90168 010 ***150.00