

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000084150

**FILED**  
**Feb 28, 2012**  
**Secretary of State**

**Entity Name:** IMPERIAL MEDICAL SUPPLY, INC.

**Current Principal Place of Business:**

2923 SW 8TH STREET  
MIAMI, FL 33135 US

**New Principal Place of Business:**

**Current Mailing Address:**

2923 SW 8TH STREET  
MIAMI, FL 33135 US

**New Mailing Address:**

888 BRICKELL KEY DR  
APT 1108  
MIAMI, FL 33131 US

**FEI Number:** 65-0453327

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CUELLO, CESAR  
2923 SW 8TH STREET  
MIAMI, FL 33135 US

**Name and Address of New Registered Agent:**

CUELLO, MICHAEL  
888 BRICKELL KEY DR  
APT 1108  
MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** MICHAEL CUELLO

02/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CUELLO, MICHAEL  
**Address:** 888 BRICKELL KEY DRIVE #1108  
**City-St-Zip:** MIAMI, FL 33131

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** MICHAEL CUELLO

P

02/28/2012

Electronic Signature of Signing Officer or Director

Date