2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000086079

1. Entity Name
MEDICAL ENGINEERING DEVELOPMENT CORP.

Principal Place of Business	Mailing Address
2951 NW 49 AVE SUITE 103 LAUDERDALE LAKES, FL 33313	2951 NW 49 AVE SUITE 103 LAUDERDALE LAKES, FL 33313

DO NOT WRITE IN THIS SPACE

04182006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0457062

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WARREN STURMAN
2951 NW 49 AVENUE
SUITE 103
LAUDERDALE LAKES, FL 33313

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. *Election Campaign Financing* Trust Fund Contribution. ☐ **$5.00** *May Be* Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CSD
NAME	STURMAN, WARREN
STREET ADDRESS	2951 NW 49 AVE SUITE 103
CITY-ST-ZIP	LAUDERDALE LAKES, FL 33313
TITLE	VD
NAME	OLMSTEAD, DAVID
STREET ADDRESS	614 HUNTERS LANE
CITY-ST-ZIP	BRENTWOOD, TN 37027
TITLE	D
NAME	KUHLMAN, RUSSELL
STREET ADDRESS	4205 KINGSTON PIKE
CITY-ST-ZIP	KNOXVILLE, TN 37919
TITLE	PD
NAME	MONTANO, ALBERT
STREET ADDRESS	249 MARKET SQUARE
CITY-ST-ZIP	LAKE FOREST, IL 60045
TITLE	D
NAME	RUBIDO, ALEXANDER
STREET ADDRESS	815 NW 57 AVENUE
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/03/06-80045-022 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WARREN STURMAN 4/18/06 (954)735-9200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #