ANNU	PROFIT PORATION AL REPORT 1996			San Sei DIVISION	EPARTMENT Indra B. Morth Cretary of Sta I OF CORPO	nam ale						
1. Corporation	NAME	P9400	00020)44 ((3)							
VALUE	MEDICAL EC	UIPMENT, INC	C.									
Principal Place	of Business		Mailing A	ddroes								
6555 N.W. 36			•	I.W. 36TH S	I T.							
STE 201E Miami FL 33 US	166		ste 20 Miami Us)1e Fl 33166				rated or Qualified	3a. Date of		•	-1
2. Principal Pla	ce of Business		2a. Mailin	g Address			01/10/19 4. FEt Number	594	03/	14/19 9	Applied For	_{
21 Suite, Apt. #	, etc.		26 Suite.	Apt. #, etc.			65-045				Not Applicable Additional	
22			27				5. Certificate of			Fee F	Required	
City & State			28	State			6. Election Cam Trust Fund C) May Be I to Fees	
Zip 24	Cc 25	untry	Zip 29		30	ountry	8. This corporat Florida Statut	ion has liability for	intangible tax u			-
		ddress of Current		Agent				ddress of New F		ent		
COPRAL	es, antonio					81 Name		·				
						82 Street Ac	dress (P.O. Box Numb	er is Not Acceptat	ole)			
6555 N.	N. 36TH ST.											1
STE 201	E					83						-
ste 201 Miami Fi	E L 33166					84 City			FL I	`	Code	
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