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PROFIT CORPORATION ANNUAL REPORT



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

1996
DOCUMENT #
1. Corporation Name

P9400002054 (2)

I & M MEDICAL EQUIPMENT CORPORATION

Principal Place of Business	

Mailing Address

4800 N.W. 4TH STREET MIAMI FL 33126 4800 N.W. 4TH STREET



REBULL, ISABEL H 6595 N.W. 36 ST. SUITE F320-A VIRGINIA GARDENS FL 33166 81 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation sut-milts this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the abignions of, Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed manse of registered agent as the if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. Title OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY-ST-ZIP 15. Title OFFICERS AND DIRECTORS IN 12 16. Title OFFICERS AND DIRECTORS IN 12 17. Title OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. Addition 19. Title OFFICERS AND DIRECTORS IN 12 10. Title OFFICERS AND DIRECTORS IN 12 10. Title OFFICERS AND DIRECTORS IN 12 11. Title OFFICERS AND DIRECTORS IN 12 12. AME 13. SIREEL ADDRESS VIRGINIA GARDENS FL OFFICERS AND DIRECTORS IN 12 OFFICERS AND	MIAMI FL	. 33126	MIAMI FL 33126			
Suite, Apt. #, etc. Suite, Ap						
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607 0507, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. SIREET ADDRESS 13. SIREET ADDRESS 6595 N.W. 36 ST. SUITE F320-A VIRGINIA GARDENS FL 12. VIRGINIA GARDENS FL 13. SIREET ADDRESS 6595 N.W. 36 ST. SUITE F320-A VIRGINIA GARDENS FL 14. CITY-ST-ZIP 15. DELETE 2 1 TITLE Change Addition 16. Addition 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. Change Addition 11. TITLE Change Addition 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. SIREET ADDRESS (14. CITY-ST-ZIP) 14. CITY-ST-ZIP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. Company Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO O	 2. Principal P 21 65 9 	lace of Business 15 NW 36 ST.	28. Mailing Address 26. (0595 Nu) 36 ST,		
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607 0507, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. SIREET ADDRESS 13. SIREET ADDRESS 6595 N.W. 36 ST. SUITE F320-A VIRGINIA GARDENS FL 12. VIRGINIA GARDENS FL 13. SIREET ADDRESS 6595 N.W. 36 ST. SUITE F320-A VIRGINIA GARDENS FL 14. CITY-ST-ZIP 15. DELETE 2 1 TITLE Change Addition 16. Addition 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. Change Addition 11. TITLE Change Addition 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. SIREET ADDRESS (14. CITY-ST-ZIP) 14. CITY-ST-ZIP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. Company Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO O	Suite, Apt. 22SU 17	#, etc. E 320-A	Suite, Apt. #, etc.	320-A	5. Certificate of Status Desired	*
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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.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305)87/1-144