FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS

DOCUMENT #	P94000089302	(1)
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P.G. MEDICAL SUPPLY, INC.

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MAMI FL 33189 MINAMI FL 33189 Substitution	Principa! Place	of Business		Mailir	ng Address						110011001100		•••••	15115 15155 11111	
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Section Sect			Country		ip	C	ountry	/		8.	This corporation	nas liability for	intangible	tax under s	199.032,
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PEREZ, MARTA 15890 S.W. 85 LANE		9. Name	and Address of Cur	rent Register	red Agent					10.	Name and Add	ess of New	Registere	d Agent	
15890 S.W. 85 LANE MIAMI FL 33193 B3 B4 City FL Other provisions of Sections 607 DD00 and 607 1506. Floods Statutes, the above memod composition submits this statement for the purpose of charging ats registered office families with, and accept the objects in the State of Forks. Sizer change were authorized by the corporation's board of directors. I hereby accept the appointment as registered office families with, and accept the objects into extigations of, Section 607.0506, Floodis Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIFLECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFLECTORS IN 12 OFFICERS AND DIFLECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFLECTORS IN 12 PEREZ, MARTA 12. ADDITIONS/CHANGES TO OFFICERS AND DIFLECTORS IN 12 OFFICERS AND DIFLECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFLECTORS IN 12 INTERPRETATIONS DELETE 1.1THE OFFICERS AND DIFLECTORS IN 12 OFFICERS AND DIFLECTORS 1.2 ADDITIONS/CHANGES TO OFFICERS AND DIFLECTORS IN 12 OFFICERS AND DIFLECTORS 1.3 ADDITIONS/CHANGES TO OFFICERS AND DIFLECTORS IN 12 OFFICERS AND DIFLECTORS IN 12 OFFICERS AND DIFLECTORS 1.3 ADDITIONS/CHANGES TO OFFICERS AND DIFLECTORS IN 12 OFFICERS AND DIFLECTORS 1.3 ADDITIONS/CHANGES TO OFFICERS AND DIFLECTORS IN 12 OFFICERS AND DIFLECTORS 1.4 CITY ST. 27 OFFICERS AND DIFLECTORS 2.4 THE ADDITIONS OFFICERS AND DIFLECTORS 3.4 CITY ST. 27 O							81	\ N	lame						
MIAMI FL 33193 Sa							82	s	treet Add	ress (P	P.O. Box Number is	Not Accepta	ple)		
### City			Æ					ļ							
FI. Pursuant to the provisions of Sections 607 0500 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Floridas Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, I am SCANATURE SECONATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INTERPRETATIONS STATE STATE STATE ACCRESS STATE ALORESS STATE A	miami fl	. 33193					83								
11. Pursuant to the provisions of Sections (2017) 600 and 607 1506, Florida Statuties, the above harmed corporation submits this statement for the purpose of changing as eigestered office or registered agent or both, in the State of their Section 607 0506, Florida Statuties (2017) and decorpt the obligations of, Section 607 0506, Florida Statuties (2017) and decorpt the obligations of, Section 607 0506, Florida Statuties							84	C	City					85 Zi	p Code
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Signature Sign	11. Pursuant to or registers	o the provisi ed agent, or	ons of Sections 607.0 both, in the State of F	502 and 607.1 Iorida. Such c	1508, Florida St atu hange was auth ori	ites, the a ized by the	bove-r g corp	nam oora	ned corpo tion's boa	ration s ird of d	submits this statem directors. I hereby a	ent for the pu locept the ap	urpose or o pointment	as registered	registered dirict i agent, I am
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oath, that Lam an officer or director of the cornoration or the receiver or trustee empowered to execute this report as required by Unapter bur, Florida Statutes, and that my hame	noth that	Lam an offic	er or director of the co	rnoration or t	he receiver or trust	tee empoy	vered	to e	execute th	is repo	ort as required by 0	Chapter 607, I	lorida Sta	tutes; and th	at my name
appears in Block 12 or Block 13 if changed, or on an attachment with an address.	appoars in	Block 12 o	r Block 13 if changed,	or on an atlac	riment with an ac k	aress.									

MARTA PEREZ SIGNATURE: SENATURE AND TYPED OF MAINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96

305-382-6364

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