

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000012033

FILED
Apr 30, 2004
Secretary of State

Entity Name: MANON MEDICAL SUPPLIES, INC.

Current Principal Place of Business:

10240 SW 56 ST
STE 110
MIAMI, FL 33165 US

New Principal Place of Business:

Current Mailing Address:

10240 SW 56 ST
STE 110
MIAMI, FL 33165 US

New Mailing Address:

FEI Number: 65-0565674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, MILENA
1800 NW 24 AVE., NO. 610
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, MILENA
Address: 3180 S.W. 129 AVENUE
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MILENA GONZALEZ

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04/30/2004

Electronic Signature of Signing Officer or Director

_____ Date