

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000014495

FILED
Jan 22, 2010
Secretary of State

Entity Name: LIDI MEDICAL SUPPLY, INC.

Current Principal Place of Business:

717 PONCE DE LEON BLVD.
SUITE 321
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

717 PONCE DE LEON BLVD.
SUITE 321
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0557559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, MERCEDES I
717 PONCE DE LEON BLVD., SUITE 339
CORAL GABLES, FL 33134 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: PD
Name: MARTINEZ, MERCEDES I
Address: 717 PONCE DE LEON BLVD., SUITE 339
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: MERCEDES MARTINEZ

P

01/22/2010

Electronic Signature of Signing Officer or Director

Date