

FILED



Jan 22 1997 8:00am
Secretary of State

1. Corporation Name
PRIORITY CARE MEDICAL EQUIPMENT CORP.



6595 NW 36 CT
#310
MIAMI FL 33166-6967
US

3a. Date of Last Report
04/10/1996

Country

☐ Yes ☐ No

FL

DATE _____

☐ Change ☐ Addition

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone #