2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000021831

Entity Name: J & E MEDICAL EQUIPMENT, CORP.

FILED Feb 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

930 E HIALEAH DR STE 14 930 HIALEAH DRIVE

HIALEAH, FL 33010 SUITE # 14

HIALEAH, FL 33010

Current Mailing Address: New Mailing Address:

930 E HIALEAH DR STE 14 930 HIALEAH DRIVE HIALEAH, FL 33010 SUITE # 14

HIALEAH, FL 33010

FEI Number: 65-0566202 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RODRIGUEZ, NANCY
930 E HIALEAH DR STE 14
HIALEAH, FL 33010 US

RODRIGUEZ, NANCY
930 HIALEAH DRIVE
SUITE # 14

HIALEAH, FL 33010 US

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: NANCY RODRIGUEZ 02/24/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

Title:

PDS

OFFICERS AND DIRECTORS:

() Delete

Title: PDS (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: RODRIGUEZ, NANCY Name: RODRIGUEZ, NANCY

Address: 930 E HAILEAH DR STE 14 Address: 930 HIALEAH DRIVE SUITE # 14

City-St-Zip: HIALEAH, FL 33010 City-St-Zip: HIALEAH, FL 33010

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: NANCY RODRIGUEZ PDS 02/24/2006

Electronic Signature of Signing Officer or Director

Date