

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000027964 (2)**
1. Corporation Name
COAST TO COAST RENTAL MEDICAL EQUIPMENT CORP.



Principal Place of Business
**360 GRECO AVE
STE 208
CORAL GABLES FL 33146**

Mailing Address
**15308 SW 81ST LANE
MIAMI FL 33193**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State
23 Zip	24 Country	28 Zip	29 Country
25		30	
3. Date Incorporated or Qualified 04/05/1995		4. FEI Number APPLIED FOR 05-056827	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**ANDREU, GONZALEZ
15308 S.W. 81ST LANE
MIAMI FL 33193**

10. Name and Address of New Registered Agent

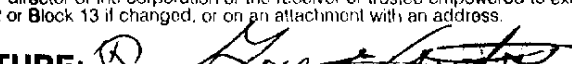
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
FL				

11. Pursuant to the provisions of Sections 607.0502 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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  DATE **4/30/98**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	
NAME	ANDREU, GONZALEO	1.2 NAME	
STREET ADDRESS	15308 SW 81ST LN	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33193	1.4 CITY-ST-ZIP	
TITLE	DV	2.1 TITLE	
NAME	ANDREU, AMPARO	2.2 NAME	
STREET ADDRESS	15308 S.W. 81ST LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33193	2.4 CITY-ST-ZIP	
TITLE	DS	3.1 TITLE	
NAME	ANDREU, AIDA	3.2 NAME	
STREET ADDRESS	15308 S.W. 81ST LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33193	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE  DATE **4/30/98**

CR2E034 (10/97)