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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Principal Place of Business

P95000046098 (6)

Mailing Address

DOCUMENT # 1. Corporation Name
GULFSTREAM MEDICAL DISTRIBUTORS, INC.



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GARCIA, RAUL E JR. 9200 S. DADELAND BLVD. SUITE 311 MIAMI FL 33156 83 City FL 85 ZP Code 11. Pursuant to the provisions of Sections 607.0502 and 807.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere or repostered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the epocerament as registered agent. SIGNATURE 12. D OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 Intit. 12. WARE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 Intit. 12. ADDITIONS/CHANGES TO OFFICERS AN			29 33716	30 Pinellas	Florida Statutes Yes	[] No
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8200 S. DADELAND BLVD. SUITE 311 MIAMI FL 33156 83 84 Only FL 85 Zep Code 85 Intert Address (P.O. Box Number is Not Acceptable) 86 Only FL 85 Zep Code 87 Only FL 85 Zep Code 88 Only FL 85 Zep Code 88 Only FL 85 Zep Code 89 Only FL 85 Zep Code 80 Only FL 85 Zep Code 80 Only FL 85 Zep Code 80 Only FL 85 Zep Code 81 Only FL 85 Zep Code 81 Only FL 85 Zep Code 82 Street Address (P.O. Box Number is Not Acceptable) 89 Only FL 85 Zep Code 80 Only FL 85 Zep Code 81 Intert Code Composition submits this statement for the purpose of changing as registered agent. Interturbing the appointment as registered agent. In	GARCI	IA, RAUL E JR.		81 Name		
MIAMI FL 33156 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 terrifier with, and accept the obligations of, Section 697,0505, Florida Statutes. SIGNATURE Signature Byseleve depend, or both, in the State of Florida. Such change was authorized by the corporation's butterist of directors. I hereby accept the appointment as registered agent. Internitive with, and accept the obligations of, Section 697,0505, Florida Statutes. SIGNATURE Signature Byseleve depends and the 1 Reclicable Molit. Registered Agent Equation recorded of directors. I hereby accept the appointment as registered agent. Internitive with, and accept the obligations of, Section 697,0505, Florida Statutes. It is not a provisions of Sections 697,0502 and 607,1508, Florida Statutes. The above-named corporation's butterist of directors. I hereby accept the appointment as registered agent. Internitive with, and accept the obligations of, Section 697,0505, Florida Statutes. The above-named corporation submits this statement for the purpose of changing agent. Internitive with and succept the appointment as registered agent. Internitive with an accept the appointment as registered agent. Internitive with an accept the appointment as registered agent. Internitive with a state of directors. I hereby accept the appointment as registered agent. Internitive with a state of directors. I hereby accept the appointment as registered agent. Internitive with a state of directors. I hereby accept the appointment as registered agent. Internitive with a state of directors. I hereby accept the appointment as registered agent. Internitive with different as registered agent. Internitive with a state of directors. I hereby accept the appointment as registered agent. Internitive with a state of directors. I hereby accept the appointment as registered agent. Internitive with a state of directors. I hereby accept the appointment as registered agent. Intern	9200 \$	S. DADELAND BLVD.		82 Street Add	dress (P.O. Box Number is Not Acceptable	e)
11. Pursuant to the provisions of Sections 807,0502 and 807,1508. Florids Statutes, the above named corporation's submits this statement for the purpose of changing its registere or registered agent, or both, in the State of Florids. Such change was surhorized by the corporation's broard of directors. I hereby accept the appointment as registered agent. SIGNATURE D				83		
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registere or registered agent, or both, in the State of Floridal Such change was authorized by the corporation's braid of directors. I hereby accept the appointment as registered agent. In this paper of the obligations of, Section 607,0505, Floridal Statutes. SIGNATURE Signature Discription Discriptio				'		
SIGNATURE Signature () personal name of regulations by its at a sections by the companion of the personal name of regulations by the companion of the compa	or registere	oo agant, or both, in the state of hong	a. Such Change was an horiz	GOLDY THE COMBONATION'S DO.	oration submits this statement for the purp ard of directors. I hereby accept the appo	
12.		n, and accept the obligations of, sector	on 607.0005, Florida Statutes	5.		
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14. I do hereby certify that the information sopplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3(k), Florida Statutes. I further that the information indicated on this angular record or supplemental angular record in true and security that the information indicated on this angular record or supplementated and does not qualify for the exemption stated in Section 119.07(3(k), Florida Statutes. I further than the information indicated on this angular record or supplementated and does not qualify for the exemption stated in Section 119.07(3(k), Florida Statutes. I further than the information indicated on this angular record or supplementation and the second of				6 4 CITY - ST- ZIP		

oath; that are information interests on trip amount eport of suppliers oath; that I am an officer or of rector of the corporation or the receiver appears in Block 12 or Block 13 if changed, or on an attachment with ntal annual report is true and accurate and that my signature shall have the same legal effect as if made under In trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

NG OF CER OR DIRECTOR