FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000054052 (2)

1. Corporation Name

TANEVY MEDICAL EQUIPMENT, INC.

Principal Place of Business
6856 W. FLAGLER ST.
SUITE A
MIAMI FL 33144

Mailing Address
6856 W. FLAGLER ST.
SUITE A
MIAMI FL 33144

3. Date Incorporated or Qualified: 07/13/1995
3a. Date of Last Report:

2. Principal Place of Business
21 6864 West Flagler St
Suite, Apt. #, etc.
22 SUITE-A
City & State
23 MIAMI,FL
Zip 24 33144 Country 25 DADE

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 65-0593900 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

CASTELLANOS, VICENTA G
800 S.W. 104TH COURT
#204
MIAMI FL 33174

10. **Name and Address of New Registered Agent**

81 Name: CASTELLANOS,VICENTA C.
82 Street Address (P.O. Box Number is Not Acceptable): 800 SW 104 th Court #204
83
84 City: MIAMI FL 85 Zip Code: 33144

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: VICENTA C CASTELLANOS *Vicenta C. Castellanos* 5/22/96

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	CASTELLANOS, VICENTA G	
STREET ADDRESS	800 S.W. 104TH CT. #204	
CITY-ST-ZIP	MIAMI FL 33174	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
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TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	CASTELLANOS VICENTA C	
1.3 STREET ADDRESS	800 S.W. 104th CT.#204	
1.4 CITY-ST-ZIP	MIAMI, FL 33174	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	900001E4100 -06/04/96--01015--005 ***200.00	☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: VICENTA C CASTELLANOS *Vicenta C. Castellanos* (305) 267-7856
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #