2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000057194

FT MYERS, FL 33919

City-St-Zip:

Entity Name: INFUSION SYSTEMS OF P.C., INC

FILED Apr 25, 2008 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
	MIAMI TRAIL ARLOTTE, FL	33952		
Current Mailing Address:			New Mailing Address:	
7050 WINI FT MYERS	KLER RD S, FL 33919			
FEI Number	: 65-0603369	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and Address of	f New Registered Agent:
The above	KLER RD S, FL 33919	US submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
SIGNATUI	RE:			
Election Car		nic Signature of Registered Age g Trust Fund Contribution ().	ent	Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPT (LARREA, MILT 7050 WINKLEF FT MYERS, FL	RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	DVS (STEELE, JEFF 7050 WINKLER		Title: Name: Address:	() Change () Addition

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LISA DOLAN, RN MS. 04/25/2008