## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000060057

Entity Name: KAYSER MEDICAL EQUIPMENT, CORP.

FILED Feb 14, 2007 Secretary of State

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

8177 SW 40 STREET SUITE 101A MIAMI, FL 33155

**Current Mailing Address: New Mailing Address:** 

8177 SW 40 STREET 8177 S.W. 40TH STREET SUITE 101A SUITE 101A MIAMI, FL 33155 MIAMI, FL 33155

FEI Number: 65-0602835 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:

BAO, JOSE GARCIA, CELIDA S 8177 SW 40 STREET, STE 101 8177 S.W. 40TH STREET MIAMI, FL 33155 SUITE 101A MIAMI, FL 33155 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: CELIDA S. GARCIA 02/14/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition PDS ( ) Delete Title: PDS

Name: BAO, JOSE Name: GARCIA, CELIDA Address:

8177 SW 40 ST., STE 101 8177 S.W. 40TH STREET, SUITE 101A Address:

City-St-Zip: MIAMI, FL 33155 S City-St-Zip: MIAMI, FL 33155 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: CELIDA S. GARCIA **PDS** 02/14/2007

Electronic Signature of Signing Officer or Director

Date