

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
May 01 1996 8:00 am  
Secretary of State

DOCUMENT # P95000071392 (1)

1. Corporation Name

SIMPLEX MEDICAL SYSTEMS, INC.



Principal Place of Business

460 POINCIANA DRIVE  
HALLANDALE FL 33009

Mailing Address

460 POINCIANA DRIVE  
HALLANDALE FL 33009

3. Date Incorporated or Qualified  
09/15/1995

3a. Date of Last Report

2. Principal Place of Business

21 430 Ansin Blvd.

22 Suite G

23 City & State  
Hallandale, FL

24 Zip  
33009

25 Country  
US

2a. Mailing Address

26 430 Ansin Blvd.

27 Suite G

28 City & State  
Hallandale, FL

29 Zip  
33009

30 Country  
US

4. FEI Number  
65-0613049

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

SOUTH FLORIDA REGISTERED AGENTS INC.  
200 EAST LAS OLAS BLVD.  
SUITE 1900  
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name  
John E. Trafton

82 Street Address (P.O. Box Number is Not Acceptable)  
285 Sunrise Drive

83 Apt. 16

84 City  
Hallandale

FL

85 Zip Code  
33149

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

*John E. Trafton*

John E. Trafton D/P

April 30, 1996

(Signature) (Typed or printed name of registered agent or director)

(Signature) (Typed or printed name of registered agent or director)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SCHUR, HENRY B  
460 POINCIANA DRIVE  
HALLANDALE FL 33009 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
FARO, JOHN H  
1451 W. CYPRESS CREEK RD.  
FT. LAUDERDALE FL 33309 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
NASSBERG, SHELDON  
460 POINCIANA DRIVE  
HALLANDALE FL 33009 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13.

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
D/V  
Henry B. Schur ☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
D/S/T  
John H. Faro ☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
D/P  
John E. Trafton  
430 Ansin Blvd., Suite G  
Hallandale, FL 33009 ☐ Change ☒ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

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:

*John E. Trafton*

John E. Trafton

May 1, 1996 (954) 455-0110

(Signature) (Typed or printed name of signing officer or director)

DATE

Phone Number

CR2E034 (12/95)