2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2005 8:00 am
Secretary of State
02-21-2005 90076 050 ***150.00

DOCUMENT # P96000030107

1. Entity Name
MEDICAL LIQUIDATORS, INC.

Principal Place of Business	Mailing Address
6344 ROUGIN ROAD → Rowen Road NEW PORT RICHEY, FL 34653	P.O. BOX 1363 TARPON SPRINGS, FL 34688

02102005 Chg-P CR2E034 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3387619 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALLEN, C. STEPHEN ESQ. ~~6344 ROWAN ROAD~~ ~~NEW PORT RICHEY, FL 34653~~ 3606 Swann Ave Tampa, FL 33609	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUNDY, GREG A 989 RIVERSIDE RIDGE TARPON SPRINGS, FL 34689	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BUNDY, MARY 989 RIVERSIDE RIDGE TARPON SPRINGS, FL 34689	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ______________________ 2/16/05 Greg A. Bundy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

20013951

Florida Department of State, Division of Corporations
Certificate of Status
www.sunbiz.org Public Inquiry

Florida Profit

MEDICAL LIQUIDATORS, INC.

MEDICAL LIQUIDATORS
6344 ROWAN ROAD
NEW PORT RICHEY, FL 34653

PRINCIPAL ADDRESS
~~6344 ROUGIN ROAD~~ → Rowan Road
NEW PORT RICHEY FL 34653
Changed 01/15/2003

MAILING ADDRESS
P.O. BOX 1363
TARPON SPRINGS FL 34688
Changed 09/21/1998

Document Number	FEI Number	Date Filed
P96000030107	593387619	04/05/1996
State	**Status**	**Effective Date**
FL	ACTIVE	NONE
Last Event	**Event Date Filed**	**Event Effective Date**
REINSTATEMENT	09/21/1998	NONE

Registered Agent

Name & Address
ALLEN, C. STEPHEN ESQ. ~~6344 ROWAN ROAD NEW PORT RICHEY FL 34653~~ 3606 Swann Ave Tampa FL 33609
Address Changed: 01/20/2004

Officer/Director Detail

Name & Address	Title