

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000030307 (8)

1. Corporation Name

COAST TO COAST HOME MEDICAL, INC.



Principal Place of Business

12302 SW 132ND CT
MIAMI FL 33186
US

Mailing Address

12302 SW 132ND CT
MIAMI FL 33186
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/08/1996

4. FEI Number

65-0656266

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 650-09 ROYAL PALM BEACH

2a. Mailing Address

26 650-09 ROYAL PALM BEACH

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 BLVD.

27 BLVD.

City & State

City & State

23 ROYAL PALM BEACH

28 ROYAL PALM BEACH

Zip

Country

Zip

Country

24 33411

25 PALM BEACH

29 33411

30 PALM BEACH

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

KERI POVEROMO

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

650-09 ROYAL PALM BEACH BLVD.

83

84 City

ROYAL PALM BEACH

FL

85 Zip Code

33411

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

Keri Poveromo

KERI POVEROMO

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 2/16/98

12. OFFICERS AND DIRECTORS

TITLE PSTD
NAME CHANDANAIS, JOSEPH R
STREET ADDRESS 12302 SW 132ND CT
CITY-ST-ZIP MIAMI FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT
1.2 NAME KERI POVEROMO
1.3 STREET ADDRESS 650-09 ROYAL PALM BEACH BLVD.
1.4 CITY-ST-ZIP ROYAL PALM BEACH, FL 33411

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. 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 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:

Keri Poveromo

2/16/98

FL 1-783-4009

CR2E034 (10/97)