2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000056566

1. Entity Name
MPI MEDICAL PRODUCTS, INC.



FILED Jan 24, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

1631 ELMHURST CIRCLE SE PALM BAY, FL 32909 1631 ELMHURST CIRCLE SE Palm Bay, FL 32909



DO NOT WRITE IN THIS SPACE

01202008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0678611 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDSTEIN, SYDNEY 1631 ELMHURST CIRCLE SE PALM BAY, FL 32909

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

CICNATURE				
SIGNATURE_	Signature, typed or printed name of registered agent and title i	applicable. (NOTE: Registered	Agent signature required when reinstating)	DATE
10.	OFFICERS AND DIREC	TORS	****	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GOLDSTEIN, SYDNEY 1631 ELMHURST CIRCLE SE PALM BAY, FL 32909			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GOLDSTEIN, HILDEGARDE 1631 ELM HURST CIRCLE SE PALM BAY, FL 32909			U00000794824 01/28/08-89923-010 150.00
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CITY-ST-ZIP	46-47-1 2003 (-3.09 m)(1 - 4. g. 40m)(5 - 4 出ている(1 - 3.00 m) (-4.00 m) (-2.00 m) (-2.00 m)	, , , , , , , , , , , , , , , , , , ,		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, 1 further certify that the information indicated on this report or supplemental report is true and acquirate 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.				

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