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

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90046 022 ***150.00

554405 - 300 .-

DOCUMEN 1: Corporation Name	т# 🦞	-0000d	11850	
1: Corporation Name	JM S	ales & Mai	Keting, I	NC,
	DBA	Sunshine	Medical	Distributors
			·	

7203 41st Court East

-	7203 412	Court E	451					
Sarasota FC 3424.			101/2	DO NOT WRITE IN THIS SPACE				
	Sarasita	PL 3	1270	3. Date Incorporated or Qualifed				
		•				Ì		
2. Principal Place of Business	2a. Mailing Addres	is	1,,,,,	4. FEI Number	Ap	plied For		
21 7203 415 Court E	26 7203		خالجان	65-0715196	No	t Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, e		<u>. , , , , , , , , , , , , , , , , , , ,</u>		\$8.75	dditional		
22	27 🕡			5. Certifcate of Status Desired	Fee Re	quired		
City & State	City & State			6. Election Campaign Financing	\$5.00	Mav Be		
23 Sarasuta , I'L	28 Sa/a S	ota 16		Trust.Eund.Contribution	Added t	o Fees		
Zip Country	Zip	Count	iry	8. This corporation owes the current ye	ar Intangible			
24 34243 25 USA	29 3424	30		Personal Property Tax.	☐ Yes	□No		
9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Registe	ered Agent			
Tanle	11	1	Name					
Joe Muscatell -				82 Street Address (P.O. Box Number is Not Acceptable)				
7203 41st Court E				•				
1213 -11 200, 2			13					
Sarasota FL 34243			4 City		85 Zip C	Code		
34,60,0	•		City		FL 85 Zip C			
11. Pursuant to the provisions of Sections 607	.0502 and 607.1508, Florida	Statutes, the abo	ve-named	corporation submits this statement for the purpo-	se of changing its	registered		
office or registered agent, or both, in the Si agent. I am familiar with, and accept the ob-	tate of Florida. Such change ofigations of, Section 607.05	e was authorized t 05, Florid ⊿1 Statut	sy the corpo	oration's board of directors. I hereby accept the a	appointment as reg	jisterea		
+ A.I.	• /		MATH	\leftarrow ς	10/40	1		
SIGNATURE Joe / 1/56-16 Signature, typed or printed name of registered	d agent and title if applicable	(NOTEL Registered A	gent signature re	equired when reinstating) DA	/ > /7/1			
12. OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER				
TITLE President	☐ DEL	ETE 🦞 1.1 TITU	.	Vice President	Change	Addition		
NAME Joe Musicatell		1.2 NAM	E	Eric Swanson of Place		ĺ		
STREET ADDRESS 7202 412 (WITE		1.3 STRI	ET ADDRESS	1610 SUMMIT FLUE		}		
CITY-ST-ZIP Section FL 3424	<u> </u>	14 CITY	- ST-ZIP	Birminghum AL 35243				
TITLE	☐ DELI	ETE 2.1 TITLE		<i>y</i> = 0	☐ Change	Addition		
NAME		2.2 NAM	E					
STREET ADDRESS		2.3 STR	ET ADDRESS			ļ		
CITY-ST-ZIP		2.4 CITY	-ST-ZIP					
TITLE	DELI	ETE 3.1 TITLE			Change	☐ Addition		
NAME		3.2 NAM						
STREET ADDRESS		3.3 STRE	ET ADDRESS			-		
CITY-ST-ZIP		3 4. CITY	-ST-ZIP					
TITLE	☐ DELI	ETE 4.1 TITLE	-		☐ Change	☐ Addition		
NAME		4. 2 NAM	E					
STREET ADDRESS		4.3 STRE	ET ADDRESS			}		
CITY-ST-ZIP		4.4 CITY	ST-ZIP					
TITLE	☐ DELI	ETE 5.1 TITLE			Change	☐ Addition		
NAME		5.2 NAM				-		
STREET ADDRESS		5.3 STRE	ETADDRESS					
CITY-ST-ZIP		5.4 CITY	ST-ZIP					
TITLE	☐ DELI	ETE 6.1 TITLE			☐ Change	☐ Addition		
NAME		6.2 NAM	E					
STREET ADDRESS		6.3 STRE	ET ADDRESS	•		Ì		
		64 CITY						

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, with all other like empowered.

SIGNATURE:

Je Muscafe 1

Toe Muscafe 1

Appliture and typed or printed name of signing officer or director

5/5/99

941-351-1938

Daytime Phone #

POE034 (11/98)

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