

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2005 8:00 am
Secretary of State

03-08-2005 90184 015 ***150.00

DOCUMENT # P96000082631

1. Entity Name

MEDTECH SUPPLIER, INC.



Principal Place of Business

8055 NW 8 ST
UNIT 1
MIAMI FL 33126
US

Mailing Address

8055 NW 8 ST
UNIT 1
MIAMI FL 33126
US

50023736



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-0699580

Applied For
Not Applicable

Zip

Country

Zip

Country

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

MANTOAN, AGNALDO
4152 PINEWOOD LN
WESTON FL 33331-3815

Name
Mantoan, Agnaldo

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

8055 NW 8 Street # 1

City

Miami

FL

Zip Code
33126

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

Agnaldo Mantoan

3/1/05

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

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

P
MANTOAN, AGNALDO
4152 PINEWOOD LANE
WESTON FL 33331

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition

P
Mantoan, Agnaldo
8055 NW 8 Street # 1
Miami, FL 33126

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

VP
MANTOAN, RUTE P
4152 PINEWOOD LANE
WESTON FL 33331

TITLE
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CITY - ST - ZIP
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VP
Mantoan, Rute P.
8055 NW 8 Street # 1
Miami, FL 33126

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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.

Agnaldo Mantoan 3/1/05 (305)266-6922

SIGNATURE: