2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2010
Secretary of State

DOCUMENT# P97000002210

Entity Name: DAILY SERVICES MEDICAL EQUIPMENT, INC.

Current Principal Place of Business:

1790 W. 49 STREET
SUITE 400-11
HIALEAH, FL 33012

New Principal Place of Business:

11117 W OKEECHOBEE RD
207
HIALEAH, FL 33018 US

Current Mailing Address:

1790 W. 49 STREET
SUITE 400-11
HIALEAH, FL 33012

New Mailing Address:

11117 W OKEECHOBEE RD
207
HIALEAH, FL 33018 US

FEI Number: 65-0722773 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARRA, DORA
18225 NW 73RD AVENUE
SUITE 207
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

PARRA, DORA
7341 NW 174 TERRACE
100
HIALEAH, FL 33015 US

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.

SIGNATURE: DORA PARRA 03/15/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D
Name: PARRA, DORA
Address: 7341 NW 174 TERRACE, ROOM 100
City-St-Zip: HIALEAH, FL 33018 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DORA PARRA P 03/15/2010
Electronic Signature of Signing Officer or Director Date