

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000024358

Entity Name: PREMIER HOME MEDICAL, INC.

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

406 N INDIANA AVENUE
SUITE 5
ENGLEWOOD, FL 34223 US

Current Mailing Address:

406 N INDIANA AVENUE
SUITE 5
ENGLEWOOD, FL 34223 US

FEI Number: 65-0766156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUHAMID, N. DEAN
512 BAYSIDE WAY
NOKOMIS, FL 34275 US

New Principal Place of Business:

406 N INDIANA AVENUE
SUITE 6
ENGLEWOOD, FL 34223 US

New Mailing Address:

406 N INDIANA AVENUE
SUITE 6
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOUHAMID, NOURDINE D PRESIDE
Address: 512 BAYSIDE WAY
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: N. DEAN BOUHAMID

PRES

04/25/2006

Electronic Signature of Signing Officer or Director

Date