2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000050904

Entity Name: AFTER CARE MEDICAL EQUIPMENT, INC.

FILED Jan 10, 2011 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
3600 S. CONGRESS AVE SUITE N BOYNTON BEACH, FL 33426				
Current Mailing Address:		New Mailing Address:		
3600 S. CONGRESS AVE SUITE N BOYNTON BEACH, FL 33426				
FEI Number: 65-0763443 FEI Number	Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
COHEN, GARY 3600 S. CONGRESS AVE SUITE N BOYNTON BEACH, FL 33426 US				
The above named entity submits this st in the State of Florida.	atement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				
Electronic Signature o	of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:				

Title:

Name: COHEN, GARY

Address: 3600 S CONGRESS AVE, SUITE N City-St-Zip: BOYNTON BEACH, FL 33426 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: GARY A. COHEN MR. 01/10/2011