

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000062514

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** PHOENIX MEDICAL DISTRIBUTOR, INC.

**Current Principal Place of Business:**

7140 SW 47 STREET  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

7140 SW 47 STREET  
MIAMI, FL 33155

**New Mailing Address:**

**FEI Number:** 65-0768661

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RACHLIN, SAUNDERS & ASSOCIATES  
11120 N. KENDALL DRIVE  
SUITE 201  
MIAMI, FL 33176 US

**Name and Address of New Registered Agent:**

VANEGAS, ROSA V  
7140 SW 47 STREET  
MIAMI, FL 33155 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:** ROSA V. VANEGAS

04/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** VANEGAS, VIRGINIA  
**Address:** 7140 SW 47 STREET  
**City-St-Zip:** MIAMI, FL 33155

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:** ROSA V. VANEGAS

D

04/19/2011

Electronic Signature of Signing Officer or Director

Date