

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000081589

FILED
Apr 30, 2004
Secretary of State

Entity Name: ARVO MEDICAL SUPPLIES, INC.

Current Principal Place of Business:

18384 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

3127 WEST HALLANDALE BEACH BLVD
SUITE 107
PEMBROKE PARK, FL 33009

Current Mailing Address:

18384 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

3127 WEST HALLANDALE BEACH BLVD
SUITE 107
PEMBROKE PARK, FL 33009

FEI Number: 65-0787455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, MARK
18384 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33160 US

Name and Address of New Registered Agent:

STEPHENS, MARK
3127 WEST HALLANDALE BEACH BLVD
SUITE 107
PEMBROKE PARK, FL 33009 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: MARK STEPHENS

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEPHENS, MARK
Address: 18384 WEST DIXIE HIGHWAY
City-St-Zip: N.MIAMI BEACH, FL 33160

Title: VP () Delete
Name: STEPHENS, SANDRA L
Address: 18384 WEST DIXIE HIGHWAY
City-St-Zip: N.MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STEPHENS, MARK
Address: 3127 WEST HALLANDALE BEACH BLVD SUITE 107
City-St-Zip: PEMBROKE PARK, FL 33009

Title: VP (X) Change () Addition
Name: STEPHENS, SANDRA L
Address: 3127 WEST HALLANDALE BEACH BLVD SUITE 107
City-St-Zip: PEMBROKE PARK, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK STEPHENS

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date