## P9800038359

OFFICE USE ONLY (Decument 4)			
OFFICE USE ONLY (Document #)			-
LAZARUS CORPORATE FILING SERVI	CE, INC.		15 <b>8</b>
(Requestor's Name)	<del></del>		FG = T
3320 s.w. 87th AVENUE			E SILE
(Address)			FILED Mis 31 F
MIAMI, FLORIDA (305)552-597		·	Fig. 10
(City, State, Zip) (Phone #)			FLO 22
LOCAL REPRESENTATIVE TALLAHASS	SEE	OFFICE USE ONLY	<u> </u>
corporation NAME(s) & DOG 1. L.C. MEDICAL	CUMENT NUM EQUI PIVI	1	RVICES INC.
(Corporation Name)		(Document #)	
2. (Corporation Name)		(Document #) 2 1 1 1 1	<i>1</i> 26285526
3.		-08	/31/9801052033 ***35.00*****35.00
(Corporation Name)		(Document #)	****35.UU-***********************************
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(Corporation Name)		(Document #)	
Walk in Pick up time	1.00	Certified Copy	
Mail out Will wait	Photocopy	Certificate of Status	;
NEW FILINGS	AMENDM	ENTS .	
Profit	Amendment		\$ 8
NonProfit	Resignation of I	R.A., Officer/Director	PEC 98 AUG 3
. Limited Liability	Change of Regis	tered Agent	
Domestication	Dissolution/With	drawal	EORPORATION
Other	Merger		AM TO
	,		<b>3</b> ₹
OTHER FILNGS	REGISTRATIO		
Annual Report	QUALIFICATIO		
Fictitious Name	Foreign		
Name Reservation	Limited Partners	hip	•
	Reinstatement		A
İ	Trademark		/\/

Other

CR2E031(9/92)

Examiner's Initials

gf3/

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 60	
undersigned corporation organized under the laws of the State submits the following statement in order to change its registere	d office or registered agent, or both, in the
State of Florida.	TREADER AND CHRYTCHE INC
1. The name of the corporation is: L.C. MEDICAL EQU	IPMENT AND SERVICES INC.
<u> </u>	
2. The mailing address of the corporation is: 248 NW 106	AVENUE
PEMBROKE P	INES, FL 33026
3. Date of incorporation/qualification: 04/27/1998	Document number: P98000038359
4. The name and address of the current registered agent and off	ice:
HUGO CEPEDA	
961 PALM AVENUE	37 5
HIALEAH, FL 33010	Mag 3
5. The name and address of the new registered agent and office	: (P. O. Box Not Acceptable)
JOSE ALTU	
248 NW 106 AVENUE	
PEMBROKE PINES, FL 33026	
The street address of its registered office and the street addragent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by authorized by the board.	its board of directors or by an officer so
(Horneway)	AUGUST 27, 1998
(Signature of an officer, chairman or vice chairman of the board)	(Date)
HIGO CONDON / PROGERRANT	
HUGO CEPEDA/ PRESIDENT  (Printed or typed name and title)	
Having been named as registered agent and to accept service corporation, I hereby accept the appointment as registered. I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and accept registered agent.	ce of process for the above stated agent and agree to act in this capacity. relative to the proper and complete of the obligation of my position as
AND AP/12	AUGUST 27,1998
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
JOSE ALTU	
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.	.00 * * *

CR2E045(7/97)