## P9800038828

BIOMEDICAL SPECIALTIES, INC. 5400 South University Drive Suite 405
Davie, FL 33328

CR2E031(7/97)

000003031180--7 -11/01/99--01119--016 \*\*\*\*\*35,00 \*\*\*\*\*\*35.00

Office Use Only						
CORPORATION NAME(S) & DO	CUMENT NUMBER(S), (if known):					
1. Biomedical Speak (Corporation Name)	ialties Inc. (Document #)	enc_omes				
2. (Corporation Name)	(Document #)					
3. (Corporation Name)	(Document #)  FILED  (Document #)  FILED  9: 37					
4. (Corporation Name)	(Document #)					
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Not for Profit Limited Liability Domestication Other	Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	-				
OTHER FILINGS	REGISTRATION/QUALIFICATION	a- toleran approximate				
Annual Report Fictitious Name	Foreign  Limited Partnership  Reinstatement  Trademark  Other  V. SHEPARD NOV 10 1999	· ·				
	Examiner's Initials					

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

Pursuant to the provision					rida Statutes,
the undersigned corporat submits the following sta the State of Florida.	="	*	•		t, or both, in
1. The name of the corpor	ration is: BIOMEDI	CAL SPECIAL	TIES, INC.	-	
2. The mailing address of	the corporation is:	6001 N.W.	153rd Stree	t, Suite 180	0,
Miami Lakes, F	L 33014		<u></u>		
3. Date of incorporation/	qualification: 4/2	9/98	Document r	umber: P9800	00038828
4. The name and address				•	
Chri	stine Sanchez				89 K
6001	N.W. 153rd Stre	et, Suite	L80	<u> </u>	為气管
. Miam	i Lakes, FL 330	14			競工
5. The name and address	of the new registered	agent and offic	e: (P. O. Box )	Not Acceptable	SSEE FLOR SID
Barb	ara Calano	· · · · ·		<u>.</u>	100 W
5400	S. University D	rive. Suite	413 405	2	Er.
Davi	e, Florida 3332	8		 £	
The street address of its r agent, as changed, will be	registered office and to	he street addre	ess of the busin	ness office of it	s registered
Such change was authorized by the board.	zed by resolution dul	y adopted by i	ts board of dir	ectors or by an	officer so
(Signature of an officer,	chairman r vice chairman	of the board)		10-28 (Date)	<u>-99</u>
Christine Sanche (Printe	z, President d or typed name and title)	·			
Having been named as re corporation, I hereby acc I further agree to comply performance of my duties registered agent.	egistered agent and to cept the appointment with the provisions o , and I am familiar w	accept servic as registered of all statutes r with and accept	e of process for agent and agree elative to the t the obligation	or the above sto se to act in this proper and con n of my position	ited capacity. nplete n as
Burgar C	7 4		11/2	alco	
Dax least a (Signature of F	Registered Agent)	<del> </del>	/O/d /Date	Y 77	
If signing on behalf of an entity		· · · ·			
BIOMEDICAL Sp.	ECIALTIES, [NO	<u> </u>	TREA	SURGR	<u></u> ,
(Typou of File	iou Haine)		(C	apacity)	
	* * * FILIN	G FEE: \$35.0	0 * * *		

CR2E045(7/97)