2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000004209

Entity Name: LOYAL MEDICAL SUPPLY, INC.

FILED Nov 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7220 N.W. 36TH ST. SUITE 618 MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

7220 N.W. 36TH ST. SUITE 618 MIAMI, FL 33166

FEI Number: 65-0888927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

IGLESIAS, MANUEL E ESQ
121 ALHAMBRA PLAZA
10 FLOOR
CORAL GABLES, FL 33134 US

MARKO, DAVID E ESQ
DE LA O, MARKO, MAGOLNICK & LEYTON
3001 S.W. 3RD AVENUE
MIAMI, FL 33129 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: DAVID EVERETT MARKO 11/29/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS () Delete Title: DPS (X) Change () Addition

 Name:
 DE ARMAS, MADELINE
 Name:
 GARCIA, YOANDRY

 Address:
 7220 N. W. 36 ST; SUITE 618
 Address:
 7220 N. W. 36 ST; SUITE 618

City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: YOANDRY GARCIA DPS 11/29/2006