

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000047796

FILED
Jan 21, 2010
Secretary of State

Entity Name: QUALIMED RESPIRATORY AND MOBILITY, INC.

Current Principal Place of Business:

704 3RD ST SW
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

704 3RD ST SW
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 59-3577525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O;TOOL, NEAL L
310 E. MAIN ST
BARTOW, FL 33830 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPS
Name: WILLIS, KAREN R
Address: 472 ARCHAIC DR
City-St-Zip: WINTER HAVEN, FL 33880

Title: PT
Name: WILLIS, BRIAN
Address: 472 ARCHAIC DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

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: BRIAN T. WILLIS

PT

01/21/2010

Electronic Signature of Signing Officer or Director

Date