

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000054111

FILED
Jan 13, 2011
Secretary of State

Entity Name: MEDICAL SUPPLY DEPOT, INC.

Current Principal Place of Business:

7239 WEST ATLANTIC AVE
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

7239 WEST ATLANTIC AVE
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 65-0927777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERMAN, WILLIAM
7239 W ATLANTIC AVE
DELRAY BEACH, FL 33446 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

OFFICERS AND DIRECTORS:

Title: P
Name: TOSCANO, LUIGI
Address: 7239 W ATLANTIC AVE
City-St-Zip: DELRAY BEACH, FL 33446

Title: ST
Name: PERMAN, WILLIAM
Address: 7239 WEST ATLANTIC AVE
City-St-Zip: DELRAY BEACH, FL 33446

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: WILLIAM PERMAN

ST

01/13/2011

Electronic Signature of Signing Officer or Director

Date