

79900006/429

May 9, 2002

100005507341--4  
-05/13/02--01100--015  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**RE:** Florida Med Distributors, Inc.

To whom it may concern:

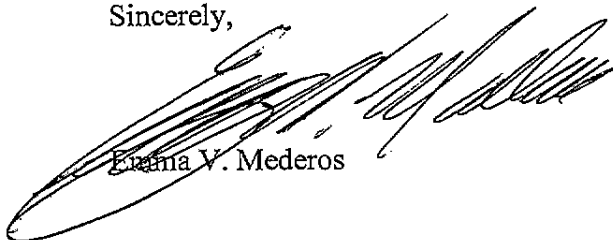
Enclosed please find and Officer / Director Resignation Form and a check in the amount of \$35.00, as I am hereby resigning to my title and all interest in the above referenced Florida Corporation.

I'd like for the mailing address to be changed to:

Florida Med Distributors, Inc.  
9328 N.W. 13 Street  
Suite 15  
Miami, Florida 33172

Any questions, please do not hesitate to contact me at your convenience.

Sincerely,



Emma V. Mederos

**FILED**  
02 MAY 13 AM 8:54  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

75 for/for  
index

**FILED**

**02 MAY 13 AM 8:55**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

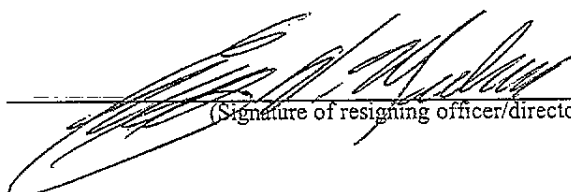
**OFFICER / DIRECTOR RESIGNATION**

I, EMMA V. MEDEROS, hereby resign as VICE PRESIDENT  
(Title)

of FLORIDA MED DISTRIBUTORS, INC.  
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**