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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

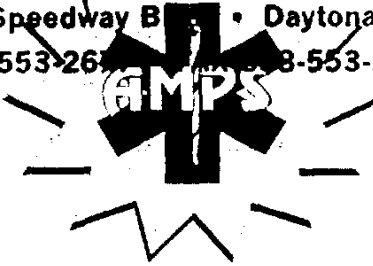
PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S01644 (1) 1. Corporation Name ADVANCED MEDICAL & PHARMACEUTICAL SUPPLIERS, INC			
Principal Place of Business 7 SUNSHINE BLVD. ORMOND BEACH FL 32174 US		Mailing Address 7 SUNSHINE BLVD. ORMOND BEACH FL 32174 US	
2. Principal Place of Business 21 3701 WEST INTERNATIONAL		2a. Mailing Address 26 3701 WEST INTERNATIONAL	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23 DAYTONA BEACH, FLORIDA		City & State 28 DAYTONA BEACH, FLORIDA	
Zip 24 32124		Zip 29 32124	
Country 25 USA		Country 30 USA	
9. Name and Address of Current Registered Agent WALLACE, DANIEL S 431 N GRANDVIEW DAYTONA BEACH FL 32118			
10. Name and Address of New Registered Agent			
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE _____ (NOTE: Registered Agent signature required when renewing) DATE _____			
12. OFFICERS AND DIRECTORS			
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SECRETARY TRASMEN 600002899406 -06/09/99--01053--007 ****150.00 ****150.00	
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NEW ADDRESS Advanced Medical & Pharmaceutical Suppliers, Inc. 3701 W. International Speedway Blvd. Daytona Beach, FL 32124 (800) 553-AMPS • FAX (888) 553-2677			
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: Michael R. Poniatowski 1-9-98 904-677-0753			

(2)

Advanced Medical & Pharmaceutical Suppliers, Inc.

3701 W. International Speedway Blvd • Daytona Beach, Florida 32124

800-553-2677 • 385-553-2677



May 26, 1999

State of Florida
Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: Document SO1644

To Whom It May Concern:

Advanced Medical and Pharmaceutical Suppliers, Inc, FEIN 59-3029315, moved to a new headquarters in April of 1998 and somehow did not receive our 1999 Annual Report Form. This was brought to our attention this afternoon.

We spoke with you department and as instructed we are enclosing our check #18428 in the amount of \$150.00 as well as a copy of the 1998 report. We were also told that due to the situation the fine/late fee would be waived.

Your co-operation in this matter will be greatly appreciated.

Thank you.

Michael R. Poniatowski
President

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