

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

FILED

May 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S03520 (1)

1. Corporation Name  
BRADWAL MEDICAL, INC.

Principal Place of Business

8632 GRIFFIN RD  
COOPER CITY FL 33328  
US

Mailing Address

8632 GRIFFIN RD  
COOPER CITY FL 33328-3719  
US

3. Date Incorporated or Qualified  
09/28/1990

3a. Date of Last Report  
08/01/1996

2. Principal Place of Business

21 8676 Griffin Rd.

Suite, Apt. #, etc.

22 City & State

23 Cooper City, FL

24 Zip

25 33328

26 USA

2a. Mailing Address

26 8676 Griffin Rd.

Suite, Apt. #, etc.

27 City & State

28 Cooper City, FL

29 Zip

30 33328

31 USA

4. FEI Number  
65-0222918

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

DAVID B MITCHELL ESQ  
2100 PONCE DE LEON BLVD.  
STE. 920  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

82 Eugene P. Samuels

83 8676 Griffin Road

84 City

Cooper City

FL

85 Zip Code

33328

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

4/25/97

12. OFFICERS AND DIRECTORS

TITLE D  
NAME HERTZ, BRADLEY  
STREET ADDRESS 8632 GRIFFIN RD  
CITY-ST-ZIP COOPER CITY FL 33328

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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

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

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the 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, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(954) 680-0906

CR2E034 (9/96)