

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

FILED

Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S13619 (9)
1. Corporation Name
MEDQUIK SUPPLY, INC.



Principal Place of Business 1486 W. PALMETTO PK RD SUITE 485 BOCA RATON FL 33486	Mailing Address 1486 W. PALMETTO PK RD SUITE 485 BOCA RATON FL 33486
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2717 W Cypress Creek Rd Suite, Apt. #, etc.		2a. Mailing Address 26 2717 W Cypress Creek Rd Suite, Apt. #, etc.		3. Date Incorporated or Qualified 11/16/1990
22 Suite 100 City & State		27 Suite 100 City & State		4. FEI Number 65-0236846
23 Ft Lauderdale, Florida Zip		28 Ft Lauderdale, Florida Zip		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
24 33309 Country		29 33309 Country		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May be Added to Fees
25 USA		30 USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☒ No

9. Name and Address of Current Registered Agent CANTOR, SAMUEL J 1489 W. PALMETTO PARK ROAD SUITE 485 BOCA RATON FL 33486		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		85 FL Zip Code	

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 _____ DATE _____
Signature of Agent or person authorized to register agent and file applicable. (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
		Change Addition	
TITLE	D	1.1 TITLE	
NAME	CANTOR, SAMUEL J.	1.2 NAME	
STREET ADDRESS	1489 W. PALMETTO PARK ROAD, SUITE 485	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33486	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 included 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 assignee and am qualified to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed from an attachment with an address.

SIGNATURE:  1/15/98 561361934

CR2E034 (10/97)