

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V03609

FILED
Jul 28, 2004
Secretary of State

Entity Name: M.K. DIABETIC SUPPORT SERVICES, INC.

Current Principal Place of Business:

555 MADISON AVENUE
NEW YORK, NY 10022 US

New Principal Place of Business:

Current Mailing Address:

555 MADISON AVENUE
NEW YORK, NY 10022 US

New Mailing Address:

FEI Number: 59-3098994

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

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: LORI KNOHL, VICE PRESIDENT

07/28/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EAMES, SARAH L
Address: 555 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022 US

Title: VP () Delete
Name: ABBASSI, MARVET
Address: 555 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022 US

Title: C () Delete
Name: AITKEN, TIMOTHY
Address: 555 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARVET ABBASSI

VP

07/28/2004

Electronic Signature of Signing Officer or Director

Date