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

PROFIT CORPORATION ANNUAL REPORT

1007



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	1001				
DOCUI 1. Corporation	MENT # V14953	(6)			
D & G I	RESPIRATORY, INC.				
				4 MARIA BARBA HIBA BARAK 18191 BARAK 181	ANDIO ANDIO ANDIN BIRNA BIONI BIBNI ABDI
Principal Place	o of Business	Mailing Address		i danit attent sibit Atasa séille aithe eir	i Mibit Dibit Billit Billit Bibit Bibit itali
	TONE TERRACE	19295 MOONSTONE TERRAC	E STYLE SURE	SET GEOMP	
WEST PALM B	EACC 51 334) 4-7960	WEST PALM (TACH III 154	4/8	WE	,
	<i>t</i> -			3. Date Incorporated or Qualified	3a, Date of Last Report
NBlA				02/18/1992	05/01/1996
2. Phytipal P	lace of Busine	2a, Mailing Address		4. FEI Number	Applied For
21 HMER	2. DIABETIC, SUPP, GA	Suite, Apt. #, etc.	<u> </u>	65-0344978	Not Applicable
Suite, Apt. 22 745	5-12TH AVE SO: STE.	Suite, Apt. #, etc.	ME	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	LES . FL.	28 Oily & Sidly	-	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 3./	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24 34		29 3	0]	Florida Statutes	as No "
	9, Name and Address of Current i	legistered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	PATRICK, KEVIN T		DI Mame		
	OS-MOONSTONE TERRA	وهور وها ماد ماه العامل الأناس الماسي	182 Street A	ddress (P.O. Box Number is Not Acceptal	ole)
W-Y	WALM-BOH FL 89414	45 12th Ave. 8. Ste. C	63		
		Neples, FL. 84102			
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named c	corporation submits this statement for the	
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida Such change was autons of Section 607,0505, Florida	thorized by the corpo de Statutes	orporation submits this statement for the paration's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE			,		
	Signature, typed or printed name of registered agent		Registered Agent signature re		DATE
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12 Change
TATLE	D Suess, Herta, G.	A DELETE	1.1 TITLE 1.2 NAME	NO LONGE	
NAME STREET ADDRESS	14529 LARKSPUR LANE		1.2 NAME 1.3 STREET ADDRESS		
CITY-SI-ZIF	WEST PALM BEACH FL		1.4 CITY-ST-ZIP	OFFICER O	F CORP.
TITLE	D	DELETE	2.1 TIFLE	D KEVIN T. FIT	Change Addition
NAME	FITZPATRICK, KEVIN T.	_	2.2 NAME	745 12th Ave. 8. Ste. C	
STREET ADDRESS	13295 MOONSTONE TERRACE		2.3 STREET ADDRESS	Naples, FL 84102	
CITY - ST - ZIP	WEST-PALM-BCH. FL		2 4 CITY-ST-ZIP		
Trīlē	D	☐ DELETE	3.1 TITLE	D. PATRICIA_ I. FITZ	PATEIL Change Addition
NAME	FITZPATRICK, PATRICIA		3.2 NAME	THE AND ALL DO	•
STREET ADDRESS	13295 MOONSTONE TERRACE		3.3 STREET ADDRESS	745 12th Ave. S. Ste. Naples, FL. 34 102	u
CITY-ST-ZIP	WEST PALM BCH FL		3.4. CITY-ST-ZIP	1100 PT 04102	
THTLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE I		m nereie	5.1 TITLE 5.2 NAME		Charge Chypanion
NAME CIDECY ADDOCSES			1		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+S1+ZIP TITLE	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
, ince		Pres. 14	E 9.1 ITTUE		Print Average Print (1904) (1917)

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 occurate 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 if changed, or on an attachment with an address

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

PATRICIA J. FITZPATRICK

FILED

Apr 17 1997 8:00am

Secretary of State