2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V21007

Entity Name: MEDEQUIP REPAIRS, INC.

FILED Jan 05, 2005 Secretary of State

7880 NW 64TH ST MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

7880 NW 64TH ST MIAMI, FL 33166

FEI Number: 65-0314246 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 LIPSON, MICHAEL T.
 LIPSON, MICHAEL T.

 13020 SW 69TH CT.
 7880 NW 64 STREET

 PINECREST, FL 33156
 US

 MIAMI, FL 33166
 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: MICHAEL LIPSON 01/05/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: () Change () Addition Name: LIPSON, MICHAEL T. Name:

 Address:
 7880 NW 64 STREET
 Address:
 Address:

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:

Title: P () Delete Title: P (X) Change () Addition

Name:BALAKONIS, MICHAELName:BALAKONIS, MICHAELAddress:5404 NORTH WEST 28TH STAddress:8520 SW 1ST STREET #107City-St-Zip:TAMARAC, FL 33309City-St-Zip:PEMBROKE PINES, FL 33025

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: MICHAEL LIPSON VP 01/05/2005