2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2012
Secretary of State

DOCUMENT# V21007

Entity Name: MEDEQUIP REPAIRS, INC.

Current Principal Place of Business:

8405 NW 29 STREET
DORAL, FL 33122

New Principal Place of Business:

8405 NW 29 STREET
DORAL, FL 33122 US

Current Mailing Address:

8405 NW 29 STREET
DORAL, FL 33122

New Mailing Address:

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

Name and Address of Current Registered Agent:

LIPSON, MICHAEL T.
8405 NW 29 STREET
DORAL, FL 33122 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP
Name: LIPSON, MICHAEL T.
Address: 8405 NW 29 STREET
City-St-Zip: DORAL, FL 33122

Title: P
Name: BALAKONIS, MICHAEL
Address: 8405 NW 29 STREET
City-St-Zip: DORAL, FL 33122

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL LIPSON VP 02/13/2012

Electronic Signature of Signing Officer or Director Date