FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

 Corporation 	MENT # V408 "S MEDICAL SUPPLY, IN		(5)								
Principal Place	of Business	Mailing Addr	ess			i jadii ahan dar	1 00 101 10100 (11				
3003 EAST HIALEAH FL		3003 EAS	ST 4 AVE. I FL 33013								
						3. Date Incorporated of	or Qualified	3a. Date		•	
2. Pancipal Pla	noo of Business	Do Maillon A				06/03/1992			14/12/	т —	
2. Principal Ma 1	ICE OF DUSINESS	2a. Mailing A	.ddress			4, FEt Number 65-034838	7		-	Applied F Not Appli	
Suite, Apl. #	f, etc.	Suite, Ap	ot. #, etc.						\$8.7	75 Addition	
2		27				5. Certificate of Status	Desireo			e Required	
City & State 3		City & Sta	ate			6. Election Campaign	-			00 May B	
7p	Country	7/p		Country		Trust Fund Contribute. 8. This corporation has				ed to Fees	
4	25	29		30		Florida Statutes	Yes	□ No	t brice.	5 100.00c	
	9. Name and Address of Curr	rent Registered Age	ent			10. Name and Addres	s of New R	egistered /	gent		
CL V/UT	O, CATALINA			81 Nar							
	u, catalina IW 169 TERR.			82 Stre	et Address	(P.O. Box Number is N	ot Acceptab	le)			
	. CITY FL 33055			83							
-	0111 . 2 30000			84 City					1527		
				84 City				FL		Zip Code	
11. Pursuant to or registere	o the provisions of Sections 607.05 ad agent, or both, in the State of Fig.	502 and 607.1508, Flo orida. Such change w	orida Statutes vas authorized	s, the above-named d by the corporatio	d corporation	n submits this statement directors. I hereby acc	nt for the pur sept the appo	pose of cha pintment as	nging its register	registered ed agent. I	office am
SIGNATURE .	of the provisions of Sections 607.05 at agent, or both, in the State of Flin, and accept the obligations of, September typed or protections of registered agency.	gent and little if applicable		E. Registered Agent signati		en reinstating)		DATE			
SIGNATURE S	Styriature, typed or printed name of registered ag	gent and little if applicable AND DIRECTORS						DATE CERS AND		ORS IN 12	
SIGNATURE S	Suprement typed or prefed name of registered as OFFICERS A P CLAVIJO, CATALINA	gent and little if applicable AND DIRECTORS	(NOTE	E. Registered Agont signate 13.		en reinstating)		DATE CERS AND	DIRECT	ORS IN 12	
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