	PROFIT		FLORIDA	DEPARTN	ENT OF STATE	FJ Apr 201	000 0.0)
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ANN	UAL REPORT 1998		.7	ecretary c N OF COF	V State RPORATIONS	Secreta	ary of S	tate
. Corporatio	on Name	V57160	(-))				
C-D H	ealthcare pr	oducts inc	•			A HARTA ANTARA BAKKI KANAL MANA ATATA	RÖ ll Rik t bible of bit of bit o	n a na an
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rincipal Place of Business Mailing Address 3021 LORETTO ROAD 3021 LORETTO ROAD				DAD				
JACKSONVILLE FL 32223 US			JACKSONVILLE FL 32223 US				E IN THIS SPACE	
						3. Date Incorporated or Qualified		
	Place of Business		2a. Mailing Address	s		08/10/1992 4. FEI Number		oplied For
3580 (Suite, Apt.	Pall Mall P	1. #1202	28 3530 Wo		es Corre Corert	59-3142794		ot Applicable
Jack	somuille . 7	lorida	Suite, Apt. #, et	.u.		5. Certificate of Status Desired		Additional equired
City & Stat	te ,		City & State 28 X Acleson	ville	Horida	 Election Campaign Financing Trust Fund Contribution 		May Be to Fees
Zip 32	257 25 L	ntry Suval	28 3222		Duval	8. This corporation owes or has p	aid the current year In	
	9. Name and Add	dress of Current F	144			Personal Property Tax due Jun 10. Name and Address of New R		_] NO
	WKLER, JOHN S. 515 OAK ST.				81 Name			
	CKSONMLLE FL 3	2204			82 Street Adde	ress (P.O. Box Number is Not Accepta	uble)	
					83			
					64 City	· · · · · · · · · · · · · · · · · · ·	FL	Code
	to the provisions of S registered agent, or b am familiar with, and a	ections 607.0502 a oth, in the State of ccept the obligatio	and 607, 1508, Florida Florida Such change ons of, Section 607,054	Statutes, was auth 05, Florida	64 City	poration submits this statement for the tion's board of directors. I hereby acce	FL	
GNATURE	to the provisions of S registered agent, or b am familiar with, and a Signalure, typed or printed n	ame of registered agent a	ind title it applicable		84 City the above-named corp orized by the corporat a Statutes.	red when reinslating)	Purpose of changing in opt the appointment as	ts registered registered
GNATURE	Signature, typied or printed n	arrie of registered agent a OFFICERS AND [ind title it applicable	(NOTE Re	64 City the above-named corp orized by the corporat a Statutes.		Purpose of changing in opt the appointment as	ts registered registered
GNATURE .£	Signature, typed or printed n	erve of registered agenit a OFFICERS AND [† G	Ind title if applicable	(NOTE Re	84 City boxe-named correction correction orized by the corporate correction a Statutes. correction gistered Agent signature require correction 13. 1.1 TifLE 1.2 NAME correction	red when reinslating)	DATE	ts registered registered
GNATURE LE WE REET ADDRESS	Signature, typied or printed n	arrie of registered agent a OFFICERS AND I I G LL DR. #1202	Ind title if applicable	(NOTE Re	84 City by the corporate corporate orized by the corporate corporate a Statutes. corporate 13. corporate 1.1 THLE corporate 1.2 NAME corporate 1.3 STREET ADDRESS corporate	red when reinslating)	DATE	ts registered registered
GNATURE .E .E IEET ADDRESS Y-ST-ZIP .E	Signature, byted or printed in CP DUNN, JOSEPH 3580 PALL MAI JACKSONVILLE VST	officers and to Officers and t G LL DR. #1202 FL 32257	Ind title if applicable	(NOTE Re	84 City boxe-named correction correction orized by the corporate correction a Statutes. correction gistered Agent signature require correction 13. 1.1 TifLE 1.2 NAME correction	red when reinslating)	DATE	ts registered registered
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GNATURE .E AE EET ADDRESS Y-ST-ZIP .E AE EET ADDRESS	Signature, typed or printed or DUNN, JOSEPH 3580 PALL MAI JACKSONVILLE VST ISON, NORAH	Are of registered agent a OFFICERS AND I I G IL DR. #1202 FL 32257 JANE VRDS COVE CT.	Ind title if applicable DIRECTORS DELET DELET	(NOTE Re	84 City by the corporate corporate a Statutes. corporate 13. corporate 1.1 TRLE corporate 1.3 STREET ADDRESS corporate 1.4 CITY-ST-ZIP corporate	red when reinslating)	DATE	ts registered registered S IN 12
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