2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 06, 2006 08:00 AM Secretary of State DOCUMENT # V64945 1. Entity Name AITIMA MEDICAL EQUIPMENT, INC. Principal Place of Business Mailing Address 275 FONTAINBLEAU BOULEVARD 275 FONTAINBLEAU BOULEVARD #166 MIAMI, FL 33172 US MIAMI, FL 33172 US CR2E034 (11/05) 01032006 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0356638 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SANCHEZ, ONELIO DO NOT WRITE 750 123 CT MIAMI, FL 33182 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent **用指语**字字语言字字 61/18/06-60023 914 P.D. 00 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. D TITLE SANCHEZ, ONELIO NAME STREET ADDRESS 750 NW 123 CT CITY-ST-ZIP MIAMI, FL 33182 TITLE NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

12.	I hereby certify that the information supplied with this fill	ing does not qualify for the exemptions	contained in Chapter 119, Florida S	tatutes. I further certify that the information
	indicated on this report or supplemental report is true ar	nd accurate and that my signature shall t	have the same legal effect as if mad	'e under oath; that I am an officer or director
	of the corporation or the receiver or histore empowered	to execute this report as required by Ch	apter 607, Florida Statutes; and that	my name appears in Block 10 or Block 11 i
	changed, or on an attachment with an acdress, with all	other like empowered.	•	

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President Onelio Sanchez 01/03/06 Dayline Proce

Applied For

Not Applicable