

**2020 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P18000052809

**Entity Name:** SALAS MEDICAL EQUIPMENT INC

**Current Principal Place of Business:**

400 N TAMPA ST  
STE 1040  
TAMPA, FL 33602

**Current Mailing Address:**

400 N TAMPA ST  
STE 1040  
TAMPA, FL 33602 US

**FEI Number:** 83-0902289

**Certificate of Status Desired:** No

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

ANGULO GARCIA, DAYERLING  
400 N TAMPA ST  
STE 1040  
TAMPA, FL 33602 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:** DAYERLING ANGULO GARCIA

06/18/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ANGULO GARCIA, DAYERLING  
Address 18210 MEDITERRANEAN BLVD  
NUM 2008  
City-State-Zip: HIALEAH FL 33015

*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:** DAYERLING ANGULO GARCIA

PRESIDENT

06/18/2020

Electronic Signature of Signing Officer/Director Detail

Date