2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003598

Entity Name: ALLIANCE MEDICAL REPROCESSING CORPORATION

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
10232 S. 51 PHOENIX, A		US			
Current Mailing Address:			New Maili	New Mailing Address:	
10232 S. 51 PHOENIX, A		US			
FEI Number: 8	86-0898793	FEI Number Applied For()	FEI Number Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:					
	Electron	nic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADD				IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	GRUTTING, JO 10232 S. 51ST PHOENIX, AZ	ST. 85044 US) Delete , TIM ST.	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	PD (X) Change () Addition GROTTING, JOHN B 10232 S. 51ST ST. PHOENIX, AZ 85044 US D (X) Change () Addition MCGINLEY, JACK 272 EAST DEERPATH ROAD, STE 350 LAKE FOREST, IL 60045	
Title: Name: Address: City-St-Zip: Title:	BOCHNOWSK	LL ROAD, BLDG. 1, SUITE 135 CA 94205	Title: Name: Address: City-St-Zip: Title:	D (X) Change () Addition DAMICO, JOSEPH F 272 EAST DEERPATH ROAD, STE 350 LAKE FOREST, IL 60045 () Change () Addition	
Name: Address: City-St-Zip:	OLIVA, ADELE 445 PARK AVE NEW YORK, N	NUE	Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MCNERNEY, P	I STREET, #3510	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MARSHALL, M	EATHER WOODS AVE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WARNOCK, TODD 272 EAST DEERPATH ROAD, STE 350 LAKE FOREST, IL 60045	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN B. GROTTING PD 04/24/2006