

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000050526

FILED
May 02, 2011
Secretary of State

Entity Name: ALLIANCE CARE OF WEST FLORIDA, INC.

Current Principal Place of Business:

2500 QUANTUM LAKES DR
STE 108
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

2500 QUANTUM LAKES DR
STE 108
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 65-0768466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOCHHAUSER, MAXINE CEO
2500 QUANTUM LAKES DRIVE
108
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: MGRM
Name: MOBILE MEDICAL INDUSTRIES
Address: 2500 QUANTUM LAKES DR STE 108
City-St-Zip: BOYNTON BEACH, FL 33426

Title: CEO
Name: HOCHHAUSER, MAXINE
Address: 2500 QUANTUM LAKES DR., #108
City-St-Zip: BOYNTON BEACH, FL 33426 US

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: MAXINE HOCHHAUSER

CEO

05/02/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date