Electronic Signature of Signing Officer/Director Detail

### 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M02755

Entity Name: AIR AMBULANCE CENTRAL, INC.

#### **Current Principal Place of Business:**

6538 COLLINS AVE 298 MIAMI, FL 33141

#### **Current Mailing Address:**

6538 COLLINS AVE 298 MIAMI, FL 33141 US

#### FEI Number: 59-2515802

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

Electronic Signature of Registered Agent

BERCU LAWRENCE R 6538 COLLINS AVE 298 MIAMI BEACH, FL 33141 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:

## Officer/Director Detail ·

Title	Р	Title	D	
Name	BERCU, LAWRENCE R.	Name	BERCU, LAWRENCE R	
Address	6538 COLLINS AVE 298	Address	6538 COLLINS AVE 298	
City-State-Zip:	MIAMI FL 33141	City-State-Zip:	MIAMI FL 33141	
Title	S	Title	т	
Title Name	S BERCU, LAWRENCE R.	Title Name	T BERCU, LAWRENCE R.	
	-		T BERCU, LAWRENCE R. 6538 COLLINS AVE 298	
Name	BERCU, LAWRENCE R.	Name		

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: LAWRENCE R BERCU

PRESIDENT

01/09/2015

Date

FILED Jan 09, 2015 Secretary of State CC3353764918

Certificate of Status Desired: No

Date