

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000094424

**Entity Name:** ALLIANCE MEDICAL CONSULTANTS, INC.

**Current Principal Place of Business:**

264 S. TRADEWINDS AVENUE  
LAUDERDALE BY THE SEA, FL 33308

**Current Mailing Address:**

264 S. TRADEWINDS AVENUE  
LAUDERDALE BY THE SEA, FL 33308

**FEI Number:** 65-1045159

**Certificate of Status Desired:** No

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

OWEN, DORINDA  
264 SOUTH TRADEWINDS AVENUE  
LAUDERDALE BY THE SEA, FL 33308 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name OWEN, DORINDA  
Address 264 S. TRADEWINDS AVENUE  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

*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:** DORINDA OWEN

**PRESIDENT**

**04/11/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date