

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000047176

**FILED  
Feb 03, 2015  
Secretary of State  
CC8829135995**

**Entity Name:** AK ALAMO MEDICAL SERVICES INC

**Current Principal Place of Business:**

1536 CYPRESS AVE  
MELBOURNE, FL 32935

**Current Mailing Address:**

17748 AYSHIRE ST  
ORLANDO, FL 32820

**FEI Number:** 27-2780017

**Certificate of Status Desired:** No

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

DIEGO, MANUEL R  
17748 AYSHIRE ST  
ORLANDO, FL 32820 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 DIEGO, MANUEL R  
Address 17748 AYSHIRE ST  
City-State-Zip: ORLANDO FL 32820

Title VP  
Name DIEGO, LINA A  
Address 17748 AYSHIRE ST  
City-State-Zip: ORLANDO FL 32820

Title SECR  
Name DIEGO, KATHRYN A  
Address 17748 AYSHIRE ST  
City-State-Zip: ORLANDO FL 32820

*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:** MANUEL R. DIEGO

**PRESIDENT**

**02/03/2015**

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

\_\_\_\_\_  
Date