## 2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000000837

Entity Name: AIR AMBULANCE PROFESSIONALS, INC.

**Current Principal Place of Business:** 

1745 NW 51 PLACE, HANGAR 73 FORT LAUDERDALE. FL 33309

**Current Mailing Address:** 

1745 NW 51 PLACE, HANGAR 73 FORT LAUDERDALE. FL 33309

FEI Number: 45-3983408 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 515 EAST PARK AVE TALLAHASSEE, FL 32301 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

Officer/Director Detail:

Title Title DST

TROLANO, JOHN Name MAROLDA, ANDREW Name

275 MADISON AVE 37TH FLOOR Address Address 275 MADISON AVE 37TH FLOOR

City-State-Zip: NEW YORK NY 10016 NEW YORK NY 10016 City-State-Zip:

Title D Title DP

Name WILLENS, DAVID A WELAZ, BRIAN Name

Address 3715 SOUTH OCEAN BLVD Address 1535 S PERIMETER ROAD HANGAR

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HIGHLAND BEACH FL 33487 City-State-Zip: City-State-Zip: FORT LAUDERDALE FL 33309

Title **DCEO** Title

Name HAYMAN, STUART Name ALAM, BADER

Address 1535 S PERIMETER ROAD HANGAR Address

275 MADISON AVE 37TH

NEW YORK NY 10016 City-State-Zip: FORT LAUDERDALE FL 33309 City-State-Zip:

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.

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**FILED** Feb 28, 2013

**Secretary of State** 

CC0677334833

Date