

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H91250

Entity Name: ALL AMERICAN MEDICAL, INC.

FILED
Jan 06, 2012
Secretary of State

Current Principal Place of Business:

5730 CORPORATE WAY
SUITE 130
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

5730 CORPORATE WAY
SUITE 130
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 59-2777203

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WENTZKA, PATRICIA
1959 CLYDESDALE ROAD
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

WARD DAMON BUSINESS SERVICES, LLC
4420 BEACON CIRCLE
WEST PALM BEACH, FL 33407 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: PHILIP H. WARD, III

01/06/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: CARRARA, MATTHEW A
Address: 12 QUEEN'S LANE
City-St-Zip: DARIEN, CT 06820

Title: TD
Name: LOFTIS, JAMES M SR.
Address: 1981 HOLLOWES TRAIL
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SD
Name: SUCCO, ANTHONY R
Address: 1376 ROYAL DEVON DRIVE
City-St-Zip: MYRTLE BEACH, SC 29575

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: MATTHEW A. CARRARA

PD

01/06/2012

Electronic Signature of Signing Officer or Director

Date