

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L14354

FILED
Feb 11, 2009
Secretary of State

Entity Name: ADVANCED MEDICAL/MENTAL HEALTH OUTREACH SERVICES TEAM, INC.

Current Principal Place of Business:

2012 VERNON PLACE SOUTH
SUITE 101
MELBOURNE, FL 32901 US

New Principal Place of Business:

Current Mailing Address:

2012 VERNON PLACE SOUTH
SUITE 101
MELBOURNE, FL 32901 US

New Mailing Address:

FEI Number: 65-0140281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALPRIN, MICHAEL
2012 VERNON PLACE SOUTH
SUITE 101
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: HALPRIN, MICHAEL,
Address: 2012 VERNON PLACE SOUTH, SUITE 101
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL HALPRIN

MR

02/11/2009

Electronic Signature of Signing Officer or Director

Date