

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M07545

FILED  
Apr 11, 2006  
Secretary of State

Entity Name: FLORIDA MEDI VAN AMBULANCE SERVICE, INC.

**Current Principal Place of Business:**

2950 NW 7TH AVENUE  
MIAMI, FL 33127 US

**New Principal Place of Business:**

**Current Mailing Address:**

2950 NW 7TH AVENUE  
MIAMI, FL 33127 US

**New Mailing Address:**

FEI Number: 65-0223507

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RODRIGUEZ, ISABEL  
5343 120TH AVE N  
WEST PALM BEACH, FL 333411 US

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

RODRIGUEZ, ISABEL M  
5343 120TH AVE N  
WEST PALM BEACH, FL 333411 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: ISABEL M RODRIGUEZ

04/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ORTEGA, ANTONIO GOME, Z  
Address: 2950 N.W. 7TH AVENUE  
City-St-Zip: MIAMI, FL 33127

Title: DPS ( ) Delete  
Name: RODRIGUEZ, ISABEL  
Address: 5343 120TH AVE N  
City-St-Zip: WEST PALM BEACH, FL 33411

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D,S (X) Change ( ) Addition  
Name: ORTEGA, ANTONIO GOME, Z  
Address: 2950 N.W. 7TH AVENUE  
City-St-Zip: MIAMI, FL 33127

Title: DP (X) Change ( ) Addition  
Name: RODRIGUEZ, ISABEL  
Address: 5343 120TH AVE N  
City-St-Zip: WEST PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify for the 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: ISABEL M RODRIGUEZ

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04/11/2006

Electronic Signature of Signing Officer or Director

Date