2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2005
Secretary of State

DOCUMENT# P01000096871

Entity Name: ADVANCED HEALTH MEDICAL CENTER, INC.

Current Principal Place of Business:

7600 W 20TH AVE. #106
HIALEAH, FL 330161895

New Principal Place of Business:

7600 W 20TH AVE.
#106
HIALEAH, FL 330161895

Current Mailing Address:

7600 W 20TH AVE. #106
HIALEAH, FL 330161895

New Mailing Address:

7600 W 20TH AVE.
#106
HIALEAH, FL 330161895

FEI Number: 65-1143256 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ESPINETA, TANIA
7600 W. 20 AVE., #106
HIALEAH, FL 330161895 US

Name and Address of New Registered Agent:

TAX DEFENSE CENTER
2350 W 84TH STREET
#18
HIALEAH, FL 33016 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: ELYSABET MONTANEZ 05/01/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RAVELO, MIRIAM
Address: 7600 W 20TH AVE. #106
City-St-Zip: HIALEAH, FL 33016

Title: VP ( ) Delete
Name: HURTADO, DIANA L
Address: 7600 W 20TH AVE #106
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIRIAM RAVELO P 05/01/2005
Electronic Signature of Signing Officer or Director Date