

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000112033

Entity Name: ADVANCED MEDICAL SERVICE, INC.

FILED
Mar 05, 2006
Secretary of State

Current Principal Place of Business:

6388 SILVER STAR RD. # 1D
ORLANDO, FL 32818

New Principal Place of Business:

825 E. OAK STREET
KISSIMMEE, FL 34744

Current Mailing Address:

2582 S. MAGUIRE ROAD, #311
OCOE, FL 34761

New Mailing Address:

P. O. BOX 420037
KISSIMMEE, FL 34742

FEI Number: 65-1153725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBSTER, PAUL S MD
2582 S. MAGUIRE ROAD, #311
OCOE, FL 34761 US

Name and Address of New Registered Agent:

WEBSTER, PAUL S MD
825 E. OAK STREET
KISSIMMEE, FL 34744 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: PAUL S. WEBSTER

03/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WEBSTER, PAUL S MD
Address: 2582 S. MAGUIRE RD. # 311
City-St-Zip: OCOE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WEBSTER, PAUL S MD
Address: 825 E. OAK STREET
City-St-Zip: KISSIMMEE, FL 34744

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: PAUL S. WEBSTER

PD

03/05/2006

Electronic Signature of Signing Officer or Director

Date