2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126592

FILED Apr 28, 2008 Secretary of State

Entity Name: ADVANCED PRIMARY CARE, INC.		-	
Current Principal Place of Business:	New Principal Place o	f Business:	
4028 TAMPA ROAD OLDSMAR, FL 34677 US			
Current Mailing Address:	New Mailing Address	:	
16308 TURNBURY OAK DRIVE ODESSA, FL 33556 US			
FEI Number: 68-0529948 FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
WU, AMANDA M MD 16308 TURNBURY OAK DR., ODESSA, FL 33556 US			
The above named entity submits this statement for the purpin the State of Florida.	oose of changing its registered	office or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution().			
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: P () Delete	Title: P (X) Change()Addition	

WU, AMANDA M WU, AMANDA M MD Name: Name: 16308 TURNBURY OAK DR 16308 TURNBURY OAK DR Address: Address: City-St-Zip: ODESSA, FL 33556 US City-St-Zip: ODESSA, FL 33556 US

Title: () Delete Title: () Change () Addition Name:

LIU. ALEXANDER Z Name: Address: 16308 TURNBURY OAK DR Address: ODESSA, FL 33556 US City-St-Zip: 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: ALEXANDER Z. LIU TS 04/28/2008