

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000005256

FILED  
May 08, 2006  
Secretary of State

Entity Name: STRATEGIC MEDICAL MANAGEMENT, INC.

## Current Principal Place of Business:

1500 CORPORATE CENTER WAY  
202B  
WELLINGTON, FL 33414 US

## Current Mailing Address:

1500 CORPORATE CENTER WAY  
202B  
WELLINGTON, FL 33414 US

## New Principal Place of Business:

1500 CORPORATE CENTER WAY  
202BE  
WELLINGTON, FL 33414 US

## New Mailing Address:

1500 CORPORATE CENTER WAY  
202E  
WELLINGTON, FL 33414 US

FEI Number: 32-0053301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NADGONDE, SURESH  
1487 RUNNING OAK LANE  
ROYAL PALM BEACH, FL 33411 US

## Name and Address of New Registered Agent:

JAYAKUMAR, MADABUSI  
1500 CORPORATE CENTER WAY  
202E  
WELLINGTON, FL 33414 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: M JAYAKUMAR

05/08/2006

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: D ( ) Delete  
Name: NADGONDE, SURESH  
Address: 1487 RUNNING OAK LANE  
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: D (X) Delete  
Name: SHAH, MEENA  
Address: 2049 POLO GARDENS DR APT 106  
City-St-Zip: WELLINGTON, FL 33414 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: VENKATASUBRAMANIAM, LAXMAN  
Address: 8220 SPRING RIDGE DRIVE  
City-St-Zip: PLANO, TX 75025 US

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 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: VENKATASUBRAMANIAM

D

05/08/2006

Electronic Signature of Signing Officer or Director

Date