

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023609

FILED
Apr 30, 2006
Secretary of State

Entity Name: QUALITY MEDICAL TRANSPORTATION, INC.

Current Principal Place of Business:

1398 NW 191 ST
MIAMI, FL 33179

New Principal Place of Business:

3901 S. OCEAN DR.
#11-O
HOLLYWOOD, FL 33019 US

Current Mailing Address:

1398 NW 191 ST
MIAMI, FL 33179

New Mailing Address:

3901 S.OCEAN DR.
#11-O
HOLLYWOOD, FL 33019 US

FEI Number: 56-2327557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDIMIR, TINOVIER
1398 NE 191ST APT 207
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

VLADIMIR, ZINOVIEV
3901 S. OCEAN DR
11-O
HOLLYWOOD, FL 33019 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: VADIMIR ZINOVIEV

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: KOUVCHINNIKOV, SERGUEI
Address: 1000 PARKVIEW DRIVE #525
City-St-Zip: HALLANDALE, FL 33009

Title: VT () Delete
Name: ZINOVIEV, VLADIMIR
Address: 1000 PARKVIEW DRIVE #525
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VT (X) Change () Addition
Name: ZINOVIEV, VLADIMIR
Address: 3901 S. OCEAN DR. #11-O
City-St-Zip: HOLLYWOOD, FL 33019

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: VLADIMIR ZINOVIEV

VT

04/30/2006

Electronic Signature of Signing Officer or Director

Date