

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000058422

FILED
Apr 28, 2006
Secretary of State

Entity Name: ADVANCED ALLERGY & ASTHMA, INC.

Current Principal Place of Business:

1048 KANE CONCOURSE, SUITE 102
BAY HARBOUR ISLANDS, FL 33154

New Principal Place of Business:

17971 BISCAYNE BLVD.
SUITE 208
AVENTURA, FL 33160

Current Mailing Address:

1048 KANE CONCOURSE, SUITE 102
BAY HARBOUR ISLANDS, FL 33154

New Mailing Address:

17971 BISCAYNE BLVD.
SUITE 208
AVENTURA, FL 33160

FEI Number: 02-0693357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, LAWRENCE A D.O.
1048 KANE CONCOURSE, SUITE 102
BAY HARBOUR ISLANDS, FL 33154 US

Name and Address of New Registered Agent:

SCHWARTZ, LAWRENCE A D.O.
17971 BISCAYNE BLVD.
SUITE 208
AVENTURA, FL 33160 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:

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHWARTZ, LAWRENCE A D.O.
Address: 1048 KANE CONCOURSE, SUITE 102
City-St-Zip: BAY HARBOUR ISLANDS, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHWARTZ, LAWRENCE A D.O.
Address: 17971 BISCAYNE BLVD, SUITE 208
City-St-Zip: AVENTURA, FL 33160

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: LAWRENCE SCHWARTZ

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date