

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000011056

FILED
Nov 10, 2005
Secretary of State**Entity Name:** ESSENTIAL ONESTOP MEDICAL INCORPORATED**Current Principal Place of Business:**12200 WEST COLONIAL DRIVE
300F
WINTER GARDEN, FL 34787 US**New Principal Place of Business:****Current Mailing Address:**12200 WEST COLONIAL DRIVE
300F
WINTER GARDEN, FL 34787 US**New Mailing Address:****FEI Number:** 01-0804966**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HURST, JAMES III
15279 HARROWGATE WAY
WINTER GARDEN, FL 34787 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PRES () Delete
Name: DOORGA, DAVID PRES.
Address: 2017 EPIC COURT
City-St-Zip: DELTONA, FL US**Title:** VP () Delete
Name: DOOLGAR, SHERLAND D
Address: 3380 LAKE TINY CIRCLE
City-St-Zip: ORLANDO, FL 32818 US**Title:** SEC () Delete
Name: PAGE, MONIQUE SEC
Address: 14003 EARLSMEDE COURT
City-St-Zip: WINTER GARDEN, FL 34787 US**Title:** VP () Delete
Name: PAGE, MIKAEL P VP
Address: 14003 EARLSMEDE COURT
City-St-Zip: WINTER GARDEN, FL 34787 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SEC (X) Change () Addition
Name: DOOLGAR, SHERLAND D SECRETA
Address: 3380 LAKE TINY CIRCLE
City-St-Zip: ORLANDO, FL 32818 US**Title:** VP (X) Change () Addition
Name: PAGE, MONIQUE VICE PR
Address: 14003 EARLSMEDE COURT
City-St-Zip: WINTER GARDEN, FL 34787 US**Title:** TREA (X) Change () Addition
Name: FRANCIS, BRENDA TREASUR
Address: 6218 GAMBLE DR.
City-St-Zip: ORLANDO, FL 32818 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID DOORGA

PRES

11/10/2005

Electronic Signature of Signing Officer or Director

Date