2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006
Secretary of State

DOCUMENT# P04000042118

Entity Name: ASSURED MEDICAL SOLUTIONS, INC.

Current Principal Place of Business:

6312 US HIGHWAY 301 N #161
ELLENTON, FL 34222

New Principal Place of Business:

13833 WELLINGTON TRACE
227
WELLINGTON, FL 33414

Current Mailing Address:

6312 US HIGHWAY 301 N #161
ELLENTON, FL 34222

New Mailing Address:

13833 WELLINGTON TRACE
227
WELLINGTON, FL 33414

FEI Number: 51-0487935 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCINTOSH, CLIVE O
7200 SUNSHINE SKYWAY LANE
7-B
ST. PETERSBURG, FL 33711 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: MCINTOSH, LORETTA
Address: 7200 SUNSHINE SKYWAY LANE 7-B
City-St-Zip: ST. PETERSBURG, FL 33711

Title: PT ( ) Delete
Name: MCINTOSH, CLIVE O
Address: 7200 SUNSHINE SKYWAY LANE
City-St-Zip: ST. PETERSBURG, FL 33711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LORETTA MCINTOSH SD 02/13/2006

Electronic Signature of Signing Officer or Director — Date