2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2007
Secretary of State

DOCUMENT# P04000146468

Entity Name: ADVANCED MEDICAL MANAGEMENT ASSOCIATES INC

Current Principal Place of Business:

3 WHITEHALL WAY
BOYNTON BEACH, FL 33436

New Principal Place of Business:

3701 FAU BOULEVARD
STE 210
BOCA RATON, FL 33431 US

Current Mailing Address:

3 WHITEHALL WAY
BOYNTON BEACH, FL 33436

New Mailing Address:

496 ELKINS RD
BAKERSVILLE, NC 28705 US

FEI Number: 20-1786407 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RINSLER, JULIAN D
5540 PACIFIC BLVD
320
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

LAFFERTY, PATRICK E
496 ELKINS RD
BAKERSVILLE, NC, FL 28705 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: PATRICK LAFFERTY 05/18/2007
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: P ( ) Delete
Name: RINSLER, JULIAN D
Address: 5540 PACIFIC BLVD APT 320
City-St-Zip: BOCA RATON, FL 33433 US

Title: VP ( ) Delete
Name: LAFFERTY, PATRICK E
Address: 3 WHITEHALL WAY
City-St-Zip: BOYNTON BEACH, FL 33436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: LAFFERTY, PATRICK E
Address: 496 ELKINS RD
City-St-Zip: BAKERSVILLE, NC 28705 US

I hereby certify that the information supplied with this filing does not qualify 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: PATRICK LAFFERTY VP 05/18/2007
Electronic Signature of Signing Officer or Director Date