2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2011
Secretary of State

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Entity Name: EMERGENCY MEDICAL TECHNOLOGIES, INC.

Current Principal Place of Business:

1814 NE MIAMI GARDENS DRIVE
SUITE 400
NORTH MIAMI BEACH, FL 33179 US

New Principal Place of Business:

Current Mailing Address:

16422 NE 34 AVENUE
NORTH MIAMI BEACH, FL 33160 US

New Mailing Address:

FEI Number: 20-1993068 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRUCE, KUSENS
16422 NE 34 AVENUE
NORTH MIAMI BEACH, FL 33160 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:	P
Name:	KLOCMAN, BERNARD
Address:	291 LANDINGS BLVD
City-St-Zip:	WESTON, FL 33327 US

Title:	VP
Name:	KUSENS, BRUCE
Address:	16422 NE 34 AVENUE
City-St-Zip:	NORTH MIAMI BEACH, FL 33160 US

I hereby 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 all other like empowered.

SIGNATURE: BRUCE KUSENS VP 01/24/2011
Electronic Signature of Signing Officer or Director Date