

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000007532

FILED
Apr 29, 2008
Secretary of State

Entity Name: ADVANCED DIABETES AND ENDOCRINE MEDICAL CENTER, P.A.

Current Principal Place of Business:

7975 LAKE UNDERHILL RD
SUITE 120
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

PO BOX 678522
ORLANDO, FL 32867

New Mailing Address:

FEI Number: 04-3803657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAHBANY, TONY
7975 LAKE UNDERHILL RD
SUITE 120
ORLANDO, FL 32822 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: PSTD () Delete
Name: RAHBANY, RITA
Address: 7975 LAKE UNDERHILL RD SUITE 120
City-St-Zip: ORLANDO, FL 32822

Title: V () Delete
Name: RAHBANY, TONY N V
Address: 7975 LAKE UNDERHILL RD SUITE 120
City-St-Zip: ORLANDO, FL 32822

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 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: TONY RAHBANY

V P

04/29/2008

Electronic Signature of Signing Officer or Director

Date