
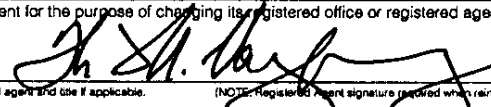
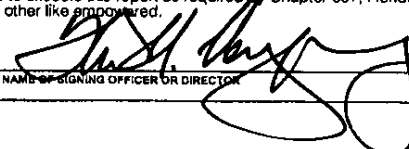


FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90078 022 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P05000008790			
1. Entity Name AHC, INC.			
Principal Place of Business 150 E PALMETTO PARK ROAD SUITE 650 BOCA RATON, FL 33432		Mailing Address 150 E PALMETTO PARK ROAD SUITE 650 BOCA RATON, FL 33432	
2. Principal Place of Business - No P.O. Box # 999 Yamato Road		3. Mailing Address 999 Yamato Road	
Suite, Apt. #, etc. Third Floor		Suite, Apt. #, etc. Third Floor	
City & State Boca Raton, FL		City & State Boca Raton, FL	
Zip 33431	Country USA	Zip 33431	Country USA
4. FEI Number NOT APPLICABLE		20-4882305 Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VARQUEZ, WILLIAM M 1001 YAMATO ROAD, SUITE 300 BOCA RATON, FL 33431		7. Name and Address of New Registered Agent Name William M. Vazquez Street Address (P.O. Box Number is Not Acceptable) 999 Yamato Road, Third Floor City Boca Raton FL Zip Code 33431	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE William M. Vazquez  DATE 4-19-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD LEDER, LAWERENCE 1001 YAMATO RD. SUITE 300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T/S/D Leder, Lawrence 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D KOSLOW, HOWARD 1001 YAMATO RD. SUITE 300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D Koslow, Howard 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEOD BARGONOFF, PETER 1001 YAMATO RD. SUITE 300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO/D Baronoff, Peter 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CMOD DAWSON, MARK M.D. 1001 YAMATO RD. SUITE 300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CMO/D Dawson, Mark, M.D. 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KANTERMAN, LARRY 1001 YAMATO RD. SUITE 300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Kanterman, Lawrence 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VAZQUEZ, WILLIAM M 1001 YAMATO RD. SUITE 300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Vazquez, William M. 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: William M. Vazquez 		4-19-07 561-869-3100 Date Daytime Phone #	