

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021117

Entity Name: ADA MEDICAL EQUIPMENT, INC.

FILED
Jan 09, 2006
Secretary of State

Current Principal Place of Business:

10715 SW 190 STREET
BAY #18
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

10715 SW 190 STREET
BAY #18
MIAMI, FL 33157

New Mailing Address:

FEI Number: 20-2324853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGUILERA, RICARDO
10715 SW 190 STREET
#18
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

PEREZ, JOSE R
10715 SW 190 STREET
#18
MIAMI, FL 33157 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: JOSE R. PEREZ

01/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AGUILERA, RICARDO
Address: 10715 SW 190 STREET #18
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: PEREZ, JOSE R
Address: 10715 SW 190 STREET #18
City-St-Zip: MIAMI, FL 33157

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: JOSE R. PEREZ

PRES

01/09/2006

Electronic Signature of Signing Officer or Director

Date