

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034151

FILED
Feb 08, 2006
Secretary of State

Entity Name: ADVANCED MEDICAL MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

1400 E OAKLAND PARK BLVD
SUITE 100
FT LAUDERDALE, FL 33334

New Principal Place of Business:

2020 NE 48TH COURT
FT LAUDERDALE, FL 33308

Current Mailing Address:

1400 E OAKLAND PARK BLVD
SUITE 100
FT LAUDERDALE, FL 33334

New Mailing Address:

2020 NE 48TH COURT
FT LAUDERDALE, FL 33308

FEI Number: 51-0536856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBROW DUKER & ASSOCIATES, PA
2832 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

DUBROW DUKER & ASSOCIATES, PA
5401 N. UNIVERSITY DRIVE
SUITE 204
CORAL SPRINGS, FL 33067 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: DUBROW DUKER

02/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIEGEL, STEVEN DR
Address: 1400 E OAKLAND PARK BLVD STE 100
City-St-Zip: FT LAUDERDALE, FL 33334

Title: VP (X) Delete
Name: REID, JASON
Address: 1400 E OAKLAND PARK BLVD STE 100
City-St-Zip: FT LAUDERDALE, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIEGEL, STEVEN DR
Address: 2020 NE 48TH COURT
City-St-Zip: FT LAUDERDALE, FL 33308

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

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: STEVEN SIEGEL

P

02/08/2006

Electronic Signature of Signing Officer or Director

Date