

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000055886

FILED
Apr 24, 2009
Secretary of State

Entity Name: CONSOLIDATED MEDICAL TRANSPORTATION, INC

Current Principal Place of Business:

15511 SW 152 LANE
MIAMI, FL 33187

New Principal Place of Business:

Current Mailing Address:

15511 SW 152 LANE
MIAMI, FL 33187

New Mailing Address:

FEI Number: 20-2716858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, JORGE
15511 SW 152 LANE
MIAMI, FL 33187 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: P () Delete
Name: ALVAREZ, JORGE
Address: 15511 SW 152 LANE
City-St-Zip: MIAMI, FL 33184

Title: V () Delete
Name: JARQUIN, MARIO
Address: 15585 SW 76 LANE UNIT 83
City-St-Zip: MIAMI, FL 33193

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T () Change (X) Addition
Name: MARIN, FRANCISCO
Address: 201 RAQUET CLUB N 321
City-St-Zip: WESTON, FL 33326

Title: D () Change (X) Addition
Name: LOPEZ, FRANCISCO
Address: 9940 NW 9 ST CIRCLE 106
City-St-Zip: MIAMI, FL 33172

Title: S () Change (X) Addition
Name: GUADAMUZ, RICARDO
Address: 17994 SW 152 PL
City-St-Zip: MIAMI, FL 33187

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: JORGE ALVAREZ

P

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date