


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 18, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90241 046 \*\*\*150.00

**DOCUMENT # P05000061476**

1. Entity Name  
**PARAMOUNT MEDICAL PROPERTY MANAGEMENT SERVICES, INC.**



Principal Place of Business      Mailing Address  
**3801 PGA BOULEVARD**      **3801 PGA BOULEVARD**  
**SUITE 600**      **SUITE 600**  
**PALM BEACH GARDENS, FL 33410 US**      **PALM BEACH GARDENS, FL 33410 US**

00010672



2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

03232006 Chg-P CR2E034 (11/05)

City & State      City & State

Zip      Country      Zip      Country

4. FEI Number      Applied For  
**20-2753338**      Not Applicable

5. Certificate of Status Desired            **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**REGSERV CORP.**  
**3801 PGA BOULEVARD**  
**SUITE 600**  
**PALM BEACH GARDENS, FL 33410**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City      **FL**      Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00 May Be Added to Fees**

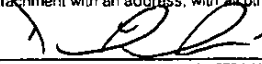
**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DPST RENDINA, BRUCE A 1549 ENCLAVE CIRCLE WEST PALM BEACH, FL 33411	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D/C/CEO RENDINA, BRUCE A 3801 PGA BLVD., STE 600 PALM BEACH GARDENS, FL 33410	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P NOTO, MICHAEL A 3801 PGA BLVD., STE 606 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP FISCHER, ERIC M 3801 PGA BLVD., STE 600 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	COO EVANS, JOHN D 3801 PGA BLVD., STE 606 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP MESSINA, DANIEL S 3801 PGA BLVD., STE 600 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP RENDINA, RICHARD M 3801 PGA BLVD., STE 600 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Change <input checked="" 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:**       **3/23/2006**      **(561) 630-5055**

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

**Daniel S. Messina, Vice President**

**ATTACHMENT**  
LAWRENCE J. DIAMOND, P.A.  
ATTORNEYS AT LAW  
3801 PGA BOULEVARD, SUITE 600  
PALM BEACH GARDENS, FLORIDA 33410

LAWRENCE J. DIAMOND  
ERIC M. FISCHER

TEL: (561) 630-5055  
FAX: (561) 630-9660

66010672  
#P0500061476  
March 23, 2006

**FEDERAL EXPRESS**

Division of Corporations  
2670 Executive Center Circle  
Suite 100  
Tallahassee, Florida 32301


Re: Paramount Medical Property Management Services, Inc.

Dear Sir or Madam:

Enclosed please find the 2006 Annual Report for Paramount Medical Property Services, Inc., together with a check in the amount of \$150.00 payable to the Secretary of State to cover the filing fee. Note that we did include an extra sheet setting forth the names and addresses of two additional officers.

Should you require any further information, please feel free to call me.

Sincerely yours,

  
Cathy Scott  
Legal Assistant

Enclosures

cc: Mike Rodriguez (with enclosures)  
Brian Dunlay (with enclosures)  
Robin Bates (with enclosures)

ATTACHMENT

6/20/06 72  
#P0500061476

2006 FOR PROFIT CORPORATION ANNUAL REPORT

*PARAMOUNT MEDICAL PROPERTY MANAGEMENT SERVICES, INC.*

Title: CFO  Addition  
Name: DUNLAY, BRIAN R  
Street/Address: 3801 PGA BLVD., STE 606  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP/S/T  Addition  
Name: DIAMOND, LAWRENCE J  
Street/Address: 3801 PGA BLVD., STE 600  
City-St-Zip: PALM BEACH GARDENS, FL 33410

LAWRENCE J. DIAMOND, P.A.

ATTORNEYS AT LAW  
3801 PGA BOULEVARD, SUITE 600  
PALM BEACH GARDENS, FLORIDA 33410

LAWRENCE J. DIAMOND  
ERIC M. FISCHER

TEL: (561) 630-5055  
FAX: (561) 630-9660

**ATTACHMENT**

April 13, 2006

66010672

**Via Federal Express**  
**2-Day Delivery**

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Paramount Medical Property Management Services, Inc.  
Reference No: P05000061476

Dear Sir or Madam:

Please find enclosed our annual report/uniform business report for the above-referenced corporation. Per your request, an officer of the corporation has executed the report.

Should you require any additional information regarding the Annual Report, please feel free to call me.

Sincerely yours,

*Cathy Scott*

Cathy Scott  
Legal Assistant

/CS  
Enclosure