

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000079198

FILED
May 11, 2006
Secretary of State

Entity Name: ULTIMED HEALTH ADVISORS, INC.

Current Principal Place of Business:

11402 SW 110TH LANE
MIAMI, FL 33176

New Principal Place of Business:

11600 SW 105 TERRACE
MIAMI, FL 33176

Current Mailing Address:

11402 SW 110TH LANE
MIAMI, FL 33176

New Mailing Address:

11600 SW 105 TERRACE
MIAMI, FL 33176

FEI Number: 01-0837270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENTHAL, JUDITH ESQ
6521 SW 100 STREET
MIAMI, FL 33156 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LITMAN, ROBERT S
Address: 11402 SW 110TH LANE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LITMAN, ROBERT S
Address: 11600 SW 105 TERRACE
City-St-Zip: MIAMI, FL 33176

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: ROBERT LITMAN

PD

05/11/2006

Electronic Signature of Signing Officer or Director

Date