

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000009406

Entity Name: TOTAL EMS, INC.

FILED
Feb 27, 2009
Secretary of State

Current Principal Place of Business:

5100 N. OCEAN BOULEVARD
SUITE 518
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

5100 N. OCEAN BOULEVARD
SUITE 518
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 75-3214321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMARK, TRACY B ESQUIRE
2500 HOLLYWOOD BOULEVARD
SUITE 209
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

NEWMARK, TRACY B ESQUIRE
2650 W. STATE ROAD 84
SUITE 101 C
FORT LAUDERDALE, FL 33312 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:

02/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: EL SANADI, LORI A
Address: 5100 N. OCEAN BOULEVARD, SUITE 518
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VP/D () Delete
Name: EL SANADI, NABIL
Address: 5100 N. OCEAN BOULEVARD, SUITE 518
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: NEWMARK, TRACY B ESQUIRE
Address: 2500 HOLLYWOOD BOULEVARD, SUITE 209
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: NEWMARK, TRACY B ESQUIRE
Address: 2650 W. STAT ROAD 84
City-St-Zip: FORT LAUDERDALE, FL 33312

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: LORI EL SANADI

P/D

02/27/2009

Electronic Signature of Signing Officer or Director

Date