

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000122331

FILED
Sep 08, 2009
Secretary of State**Entity Name:** ADVANCED MEDICAL TECHNOLOGY GROUP, INC.**Current Principal Place of Business:**12636 SOUTH LAKE SAWYER LANE
WINDERMERE, FL 34786**New Principal Place of Business:****Current Mailing Address:**12636 SOUTH LAKE SAWYER LANE
WINDERMERE, FL 34786**New Mailing Address:****FEI Number:** 20-5616639**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**YEFIMOV, DMITRIY
12636 SOUTH LAKE SAWYER LANE
WINDERMERE, FL 34786 US**Name and Address of New Registered Agent:**GARAFUTDINOV, MARAT V
12636 SOUTH LAKE SAWYER LANE
WINDERMERE, FL 34786 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: MARAT GARAFUTDINOV

09/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YEFIMOV, DMITRIY
Address: 12636 SOUTH LAKE SAWYER LANE
City-St-Zip: WINDERMERE, FL 34786

Title: VP (X) Delete
Name: YEFIMOVA, NATALYA
Address: 12636 SOUTH LAKE SAWYER LANE
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Delete
Name: YEFIMOVA, YEKATERINA
Address: 12636 SOUTH LAKE SAWYER LANE
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARAFUTDINOV, MARAT V
Address: 12636 SOUTH LAKE SAWYER LANE
City-St-Zip: WINDERMERE, FL 34786

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

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

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: MARAT GARAFUTDINOV

P

09/08/2009

Electronic Signature of Signing Officer or Director

Date