

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000150986

FILED
Mar 20, 2011
Secretary of State

Entity Name: ELITE MEDICAL TRAINING, CORP.

Current Principal Place of Business:

7599 BERKSHIRE PINES DRIVE
NAPLES, FL 34104

New Principal Place of Business:

7599 BERKSHIRE PINES DRIVE
NAPLES, FL 34104 UN

Current Mailing Address:

8595 COLLIER BLVD STE 107
PMB-14
NAPLES, FL 34114

New Mailing Address:

FEI Number: 20-8600109 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRAGUELA, NOEMI I
8595 COLLIER BLVD STE 107
PMB-14
NAPLES, FL 34114 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

OFFICERS AND DIRECTORS:

Title: PT
Name: SCHULTZ, ANDREA
Address: 7599 BERKSHIRE PINES DRIVE
City-St-Zip: NAPLES, FL 34104 UN

Title: VS
Name: FRAGUELA, NOEMI I
Address: 8595 COLLIER BLVD STE 107-14
City-St-Zip: NAPLES, FL 34114 UN

I hereby 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 all other like empowered.

SIGNATURE: NOEMI I. FRAGUELA

VS

03/20/2011

Electronic Signature of Signing Officer or Director

Date