FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000047919 (4)

D.G. MEDICAL TRANSPORT, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

FILED Feb 03 1997 8:00am Secretary of State



2923 NW 7 ST MIAMI FL 33125 US		2923 NW 7TH ST MIAMI FL 33125-4305 US			3. Date Incorporated or Qualified 07/09/1993	e of Last Report 4/1996		
2. Principal Pla	ace of Business	2a. Mailing Address		······································	4 FEI Number	1 02/14	····	plied For
21 9531 Fa	INTAINEBLEU BLUO.	26 9531 PONTI	AINE	Bleu Blu	4 65-0424258			t Applicable
Suite, Apt. #, etc. 22 603		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additlonal Fee Required		
City & State	AMI, FI.	City & State 28 MIAMI F.		Election Campaign Financing Trust Fund Contribution	4	↑ \$5.00 May Be Added to Fees		
ZIP 24 33172	Country 20 Country 27 30 US		s a	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
-	9. Name and Address of Current	150	30		10. Name and Address of New Re			
GON	ZALEZ, DANIEL S		81	Name				
2923 NW 7 ST				Street Addre	ess (P.O. Box Number is Not Acceptab	le)	·	
MIAMI FL 33125								
			83	3				
			84	City			85 Zip (Code
dd Dannasti	d C - C - C - C - C - C - C - C - C - C	and CO7 1500 Classes Chat de				<u>FL</u>		
Office or re	edistered agent, or both, in the State o	f Florida. Such change was a	iuthorized b	iv the corporation	oration submits this statement for the pon's board of directors. I hereby accep	urpose of c it the appoi	nanging iti niment as	s registered registered
	n familiar with, and accept the obligati	oris of, Section 607.0505, Fig	orida Statute	98.	,	25/	97	
SIGNATURE	Signal are lightered pointed numer or registres as a 2.1	ano tille il conicable (NOTE	Registered Ar	jent signature require	d when reinstating)	DATE		* * * * * * * * * * * * * * * * * * * *
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND D	RECTOR	S IN 12
TITLE	DPST	☐ DELETE	1.1 TITLE	į			Change	Addition
NAME	GONZALEZ, DANIEL S		1.2 NAME					
STREET ADDRESS !	2023 NW 7TH STREET			T ADDRESS				
CITY-S1-ZIP TITLE	MIAMI FL DV	DELETE	1.4 CITY -	~~~~			Change	Addition
NAME	BRESNINAN, CAROL	ר ו מרנדור	2.1 TITLE 2.2 NAME			L		Monitori
STREET ADDRESS	2928 NW TH STREET			T ADDRESS				
CITY-S1-7IP	MIAMI FL		2. 4 CITY					
TITLE		DELETE	3.1 TITLE			····	Change	Addition
NAME			3.2 NAME	.				
STREET ADDRESS			3.3 STREE	T ADDRESS	•			
CITY - S1 - 7IP			3.4. CITY-	-St-ZIP				
TITLE		DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAMI	E				
STREET ADDRESS			4.3 STREE	T ADDRESS				
C(TY-S) ZIP		The see	4.4 CITY-	SI-ZIP			7.5.	
TITLE		☐ DELETE	5.1 TITLE			L	Change	Addition
NAME Davies upperson			5.2 NAME					
STREET ADOPESS				T ADDRESS				
CITY-S1-ZIP TITL€		DELETE	5.4 CITY - 6.1 TITLE	SI-ZIP		r	Change	Addition
NAME		ET-percie	6.2 NAME			L	ு பங்புக	LT Vagaria
STREET ADDRESS				T ADDRESS				
CITY-S1-ZIP			6.4 CiTY-	·				
14. Ldo hereb	y certify that the information supplied	with this filing does not qualif	v for the ex	emption stated	in Section 119.07(3)(i), Florida Statule	s. I further d	ertify that	the
information Lam an of	r indicated on this annual report or su	optemental annual report is tr ne receiver or trustee empow	ue and acc ered to exe	curate and that	my signature shall have the same lega as required by Chapter 607, Florida S	l effect as r	made und	der oath: tha