2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# P95000024839

Entity Name: AMBITRANS MEDICAL TRANSPORT, INC.

Current Principal Place of Business:

22093 KIMBLE AVENUE
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 494317
PORT CHARLOTTE, FL 33999 US

New Mailing Address:

PO BOX 494317
PORT CHARLOTTE, FL 33949 US

FEI Number: 65-0571130 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRANT, MICHAEL
22093 KIMBLE AVE
PORT CHARLOTTE, FL 33952 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GRANT, MICHAEL
Address: 22093 KIMBLE AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D ( ) Delete
Name: GRANT, LORRAINE
Address: 22093 KIMBLE AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MICHAEL GRANT D 04/24/2007

Electronic Signature of Signing Officer or Director Date