

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000094160

FILED
Jan 27, 2006
Secretary of State

Entity Name: ALERT RESPIRATORY SERVICES, INC.

Current Principal Place of Business:

12630 METRO PARKWAY
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

12630 METRO PARKWAY
FORT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 65-0446308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILITELLO, KAREN
8989 PASEO DE VALENCIA ST
FT MYERS, FL 33908 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: MILITELLO, KAREN
Address: 8989 PASEO DE VALENCIA
City-St-Zip: FT MYERS, FL 33908

Title: V (X) Delete
Name: MILITELLO, THOMAS J
Address: 8989 PASEO DE VALENCIA
City-St-Zip: FT MYERS, FL 33908

Title: T () Delete
Name: CUENCA, ROBERT
Address: 423 SW 38TH ST
City-St-Zip: CAPE CORAL, FL 33914

Title: S () Delete
Name: GRANT, MELISSA
Address: 7002 KIMBERLY TERR
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: CUENCA, VALERIE
Address: 423 SW 38TH ST
City-St-Zip: CAPE CORAL, FL 33914

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: KAREN A MILITELLO

D

01/27/2006

Electronic Signature of Signing Officer or Director

_____ Date