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FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000007586 (6)

1. Corporation Name

PROFESSIONAL MEDICAL TRANSPORTATION CORP.

Principal Place of Business

201 MINOLA DRIVE
MIAMI SPRINGS FL 33166

Mailing Address

P O BOX 661193
MIAMI SPRINGS FL 33266

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/22/1996

4. FEI Number

APPLIED FOR 65-0649176

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 201 Minola Dr

22 Suite, Apt. #, etc.

23 City & State

23 Miami Springs

24 Zip

24 33166

25 Country

25 USA

2a. Mailing Address

26 same as above

27 Suite, Apt. #, etc.

28 City & State

28

29 Zip

29

Country

30

9. Name and Address of Current Registered Agent

PAZOS, XIOMARA
201 MINOLA DRIVE
MIAMI SPRINGS FL 33166

10. Name and Address of New Registered Agent

81 Name

81 none

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1308, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Xiomara Pazos

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PS
PAZOS, XIOMARA V
STREET ADDRESS 201 MINOLA DRIVE
CITY-ST-ZIP MIAMI SPRINGS FL 33266

TITLE ☐ DELETE

NAME VT
PAZOS, GEORGE B
STREET ADDRESS 201 MINOLA DRIVE
CITY-ST-ZIP MIAMI SPRINGS FL 33266

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Xiomara Pazos

400002490024
-04/16/98-01014-018
***150.00

CR2E034 (10/97)