2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED Mar 22, 2011 Secretary of State

Entity Name: PROFESSIONAL MEDICAL TRANSPORTATION CORP.

New Principal Place of Business: Current Principal Place of Business: 7880 WEST 20 AVE STE 28 HIALEAH, FL 33016 **Current Mailing Address: New Mailing Address:** 7880 WEST 20 AVE STE 28 HIALEAH, FL 33016 US FEI Number: 65-0649176 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PAZOS, XIOMARA 7880 WEST 20 AVE HIALEAH, FL 33016 US 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:
 PAZOS, XIOMARA

 Address:
 P. O. BOX 160338

 City-St-Zip:
 HIALEAH, FL 33016 US

Title: VS

 Name:
 PAZOS, XIOMARA

 Address:
 P,O. BOX 160338

 City-St-Zip:
 HIALEAH, FL 33016 US

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: XIOMARA PAZOS PRES 03/22/2011