

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024382

Entity Name: ALL-MED EXPRESS, INC.

FILED  
Jan 10, 2006  
Secretary of State

## Current Principal Place of Business:

922 SW 124 TR  
DAVIE, FL 33325

## New Principal Place of Business:

2220 COUNTY ROAD 210 WEST  
SUITE 108  
JACKSONVILLE, FL 32259

## Current Mailing Address:

922 SW 124 TR  
DAVIE, FL 33324

## New Mailing Address:

2220 COUNTY ROAD 210 WEST  
SUITE 108  
JACKSONVILLE, FL 32259

FEI Number: 65-0903450

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRIFFIN, BRUCE  
922 SW 124 TERRACE  
DAVIE, FL 33325 US

## Name and Address of New Registered Agent:

GRIFFIN, ILISA  
2220 COUNTY ROAD 210 WEST  
SUITE 108  
JACKSONVILLE, FL 32259 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: ILISA GRIFFIN

01/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GRIFFIN, BRUCE A  
Address: 922 SW 124TH STREET  
City-St-Zip: DAVIE, FL 33325

Title: VP ( ) Delete  
Name: VESPI, ANGELO E  
Address: 12408 SW 8TH COURT  
City-St-Zip: DAVIE, FL 33325

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GRIFFIN, BRUCE A  
Address: 2220 COUNTY ROAD 210 WEST, SUITE 108  
City-St-Zip: JACKSONVILLE, FL 32259

Title: VP (X) Change ( ) Addition  
Name: VESPI, ANGELO E  
Address: 2220 COUNTY ROAD 210 WEST, SUITE 108  
City-St-Zip: JACKSONVILLE, FL 32259

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: BRUCE A. GRIFFIN

P

01/10/2006

Electronic Signature of Signing Officer or Director

Date