

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 07, 2011  
Secretary of State**

DOCUMENT# N09000012109

Entity Name: PROFESSIONAL HEALTHED BROKERS, INC

**Current Principal Place of Business:**

% ROLANDO SANCHEZ  
169 E FLAGLER STREET, SUITE 800  
MIAMI, FL 33131

**New Principal Place of Business:**

% ROLANDO SANCHEZ  
169 E FLAGLER STREET, SUITE 800  
MIAMI, FL 331311296

**Current Mailing Address:**

% ROLANDO SANCHEZ  
169 E FLAGLER STREET, SUITE 800  
MIAMI, FL 33131

**New Mailing Address:**

% ROLANDO SANCHEZ  
169 E FLAGLER STREET, SUITE 800  
MIAMI, FL 331311296

FEI Number: 27-1552584

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANCHEZ, ROLANDO  
169 E FLAGLER STREET  
SUITE 800  
MIAMI, FL 33131 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SANCHEZ, ROLANDO  
Address: 169 E FLAGLER STREET, SUITE 800  
City-St-Zip: MIAMI, FL 33131

Title: SD  
Name: SANCHEZ, ALEXIS  
Address: 169 E FLAGLER STREET, SUITE 800  
City-St-Zip: MIAMI, FL 33131

Title: TD  
Name: SANCHEZ, DANIEL  
Address: 169 E FLAGLER STREET, SUITE 800  
City-St-Zip: MIAMI, FL 33131

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROLANDO SANCHEZ

PRES

01/07/2011

Electronic Signature of Signing Officer or Director

Date