

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000031111

FILED
Sep 26, 2007
Secretary of State

Entity Name: SANUS HEALTH SYSTEM, INC.

Current Principal Place of Business:

1395 BRICKELL AVE STE 630
MIAMI, FL 33131 US

New Principal Place of Business:

3400 SOUTH WEST 27TH AVENUE
1605
MIAMI, FL 33133 US

Current Mailing Address:

1395 BRICKELL AVE STE 630
MIAMI, FL 33131

New Mailing Address:

3400 SOUTH WEST 27TH AVENUE,
1605
MIAMI,, FL 33133

FEI Number: 02-0799635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

ESHESIMUA, GODWIN W MR
3400 SOUTH WEST 27TH AVENUE,
1605
MIAMI, FL 33133 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: GODWIN W. ESHESIMUA

09/26/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: ESHESIMUA, GODWIN M
Address: 1395 BRICKELL AVE STE 630
City-St-Zip: MIAMI, FL 33131 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C/D (X) Change () Addition
Name: ESHESIMUA, GODWIN W CEO
Address: 3400 SOUTH WEST 27TH AVENUE, SUITE 1605
City-St-Zip: MIAMI, FL 33131 US

Title: D () Change (X) Addition
Name: OMBU, EMMANUEL D
Address: 3350 SOUTH WEST 27TH AVENUE, SUITE 1507
City-St-Zip: MIAMI,, FL 33133

Title: P/D () Change (X) Addition
Name: GARCIA, ROBERT P/D
Address: 1395 BRICKELL AVENUE, SUITE 800
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify 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: GODWIN W. ESHESIMUA

CEO

09/26/2007

Electronic Signature of Signing Officer or Director

Date