2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# 563423

Entity Name: HEALTH CARE CONSULTING SERVICES, INC.

Current Principal Place of Business:

782 N.W. LEJUNE RD
SUITE 638
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

782 N.W. LEJUNE RD
SUITE 638
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 59-1805494 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANCHEZ, ROBERTO
782 N.W. LEJUNE RD
#638
MIAMI, FL 33126 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: SANCHEZ, ROBERTO
Address: 1790 BAY DR
City-St-Zip: MIAMI BCH, FL 33141 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ROBERTO SANCHEZ MR 04/15/2009

Electronic Signature of Signing Officer or Director Date