

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000029572

Entity Name: DIGITAL HEALTH IMPACT INC.

Current Principal Place of Business:

9200 NW 36TH PLACE
A-6
GAINESVILLE, FL 32606

Current Mailing Address:

PO BOX 357892
GAINESVILLE, FL 32635 US

FEI Number: 45-1018237

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DEEGAN, TIMOTHY
9200 NW 36 PLACE
GAINESVILLE, FL 32606 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

Officer/Director Detail :

| | | | |
|-----------------|----------------------|-----------------|----------------------|
| Title | D | Title | P, S |
| Name | DEEGAN, TIM | Name | BERNHARDT, JAY MDR. |
| Address | 9200 NW 36TH PLACE | Address | PO BOX 357892 |
| City-State-Zip: | GAINESVILLE FL 32606 | City-State-Zip: | GAINESVILLE FL 32635 |

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: JAY BERNHARDT

PRESIDENT

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date