

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000666

Entity Name: VITAS SOLUTIONS, INC.**Current Principal Place of Business:**100 SOUTH BISCAYNE BLVD
SUITE 1500
MIAMI, FL 33131**Current Mailing Address:**255 EAST 5TH STREET
SUITE 2600-BARBARA S. GUGEL
CINCINNATI, OH 45202**FEI Number:** 35-2325524**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	DCEO
Name	O'TOOLE, TIMOTHY SCEO
Address	100 SOUTH BISCAYNE BOULEVARD, SUITE 1500
City-State-Zip:	MIAMI FL 33131

Title	PCFO
Name	WESTER, DAVIDHY ACFO
Address	100 SOUTH BISCAYNE BOULEVARD, SUITE 1500
City-State-Zip:	MIAMI FL 33131

Title	AT
Name	STEPHENS, MARK W
Address	255 E 5TH ST, SUITE 2600
City-State-Zip:	CINCINNATI OH 45202

Title	SGC
Name	DALLOB, NAOMI C
Address	100 SOUTH BISCAYNE BOULEVARD, SUITE 1500
City-State-Zip:	MIAMI FL 33131

Title	VP
Name	WILLIAMS, DAVID P
Address	100 SOUTH BISCAYNE BOULEVARD, SUITE 1500
City-State-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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK W. STEPHENS**ASSISTANT TREASURER** 03/19/2014_____
Electronic Signature of Signing Officer/Director Detail_____
Date