

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 834870

FILED
Apr 25, 2008
Secretary of State

Entity Name: NATIONAL HEALTH CONSULTANTS

Current Principal Place of Business:

2128 NE 63RD STREET
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

2631 EAST OAKLAND PARK BLVD.
SUITE 201
FORT LAUDERDALE, FL 33306 US

Current Mailing Address:

2128 NE 63RD STREET
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

2631 EAST OAKLAND PARK BLVD.
SUITE 201
FORT LAUDERDALE, FL 33306 US

FEI Number: 59-1607377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GALLAGHER, JOHN B
2128 NE 63RD STREET
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

GALLAGHER, JOHN B
2631 EAST OAKLAND PARK
SUITE 201
FORT LAUDERDALE, FL 33306 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:

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NESSLEIN, DAVID A.,
Address: 2128 NE 63RD STREET
City-St-Zip: FORT LAUDERDALE, FL 33308 US

Title: STD () Delete
Name: VAZQUEZ, SANDRA
Address: 2128 NE 63RD STREET
City-St-Zip: FORT LAUDERDALE, FL 33308 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NESSLEIN, DAVID A.,
Address: 2631 EAST OAKLAND PARK BLVD., SUITE 201
City-St-Zip: FORT LAUDERDALE, FL 33306 US

Title: STD (X) Change () Addition
Name: VAZQUEZ, SANDRA
Address: 2631 EAST OAKLAND PARK BLVD., SUITE 201
City-St-Zip: FORT LAUDERDALE, FL 33306 US

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: DAVID A. NESSLEIN

PD

04/25/2008

Electronic Signature of Signing Officer or Director

Date