2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006764

FILED Mar 05, 2007 Secretary of State

Entity Name: PUBLIC HEALTH FOUNDATION ENTERPRISES, INC.

Current Principal Place of Business: New Principal Place of Business: 13200 CROSSROADS PARKWAY NORTH, SUITE 135 CITY OF INDUSTRY, CA 91746 **Current Mailing Address: New Mailing Address:** 13200 CROSSROADS PARKWAY NORTH, SUITE 135 CITY OF INDUSTRY, CA 91746 FEI Number: 95-2557063 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UCC FILING & SEARCH SERVICES, INC. 1574 VILLAGE SQUARE BLVD, STE 100 TALLAHASSEE, FL 32309 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CEOP () Delete () Change () Addition SOLOMON, GERALD R Name: Name: 13200 CROSSROADS PARKWAY NORTH, STE 135 Address: Address: City-St-Zip: CITY OF INDUSTRY, CA 91746 City-St-Zip: Title: Title: () Delete () Change () Addition WESTFALL, ROBERT D Name: Name: Address: 2 SOUTH OLD RANCH ROAD Address: City-St-Zip: ARCADIA, CA 91107 City-St-Zip: Title: **VPAS** () Delete Title: () Change () Addition VACKO, SUSAN Name: Name: Address: 9151 CAMELLIA COURT Address: City-St-Zip: ALTA LOMA, CA 91737 City-St-Zip: Title: BOD () Delete Title: () Change () Addition Name: QURESHI, AZHAR K Name: Address: 500 SOUTH MAIN STREET #900 Address: City-St-Zip: ORANGE, CA 928684533 City-St-Zip: Title: () Delete Title: () Change () Addition DIGIAMPAOLO, ELLEN R RD Name: Name: 303 W. HILLDALE STREET Address: Address: City-St-Zip: INGLEWOOD, CA 90302 City-St-Zip: Title: () Delete Title: () Change () Addition DRAKE, ANNETTE T Name: Name: Address: 19515 EAGLE RIDGE LANE Address: NORTHRIDGE, CA 91326 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERALD R. SOLOMON, JD CEO 03/05/2007