2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# J09895

Entity Name: HEALTH CARE INVESTORS, INC.

Current Principal Place of Business:

46319 STRATTON TERRACE
102
STERLING, VA 20165 US

New Principal Place of Business:

Current Mailing Address:

46319 STRATTON TERRACE
102
STERLING, VA 20165 US

New Mailing Address:

FEI Number: 59-2674413 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OSAMA, KAYALI, CPA
7628 N 56TH STREET STE 2
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

OSAMA, KAYALI, CPA
8064 N 56TH STREET STE 2
TAMPA, FL 33617 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: 04/28/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ELKADI, IMAN
Address: 20453 CHESAPEAKE SQUARE, #103
City-St-Zip: STERLING, VA 20165 US

Title: STD ( ) Delete
Name: MOSTAFA, ABDEL M
Address: 46319 STRATTON TERRACE, # 102
City-St-Zip: STERLING, VA 20165 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ELKADI, IMAN
Address: 6938 GREENHILL PLACE
City-St-Zip: TAMPA, FL 33617 US

Title: ( ) Change ( ) Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IMAN ELKADI PD 04/28/2006
Electronic Signature of Signing Officer or Director — Date