

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L01752

Entity Name: PROSALUD, INC.

FILED
Apr 29, 2010
Secretary of State

Current Principal Place of Business:

8333 W MCNAB RD
129
TAMARAC, FL 33321

New Principal Place of Business:

7797 N UNIVERSITY DR,
104
TAMARAC, FL 33321

Current Mailing Address:

8333 W MCNAB RD
129
TAMARAC, FL 33321

New Mailing Address:

7797 N UNIVERSITY DR,
104
TAMARAC, FL 33321

FEI Number: 65-0132328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEIRA, RICARDO A
8333 W MCNAB ROAD # 101
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

NEIRA, RICARDO A
7797 N UNIVERSITY DR, #104
TAMARAC, FL 33321 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: RICARDO NEIRA

04/29/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: NEIRA, GABRIEL
Address: 7797 N UNIVERSITY DR, #104
City-St-Zip: TAMARAC, FL 33321

Title: VP
Name: NEIRA, RICARDO
Address: 7797 N UNIVERSITY DR, #104
City-St-Zip: TAMARAC, FL 33321

Title: ADM
Name: NEIRA, ALEXANDRA
Address: 7797 N. UNIVERSITY DR, #104
City-St-Zip: TAMARAC, FL 33321

Title: MAG
Name: FUENTES, CLAUDIA
Address: 7797 N UNIVERSITY DR, #104
City-St-Zip: TAMARAC, FL 33321

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: CLAUDIA FUENTES

MAG

04/29/2010

Electronic Signature of Signing Officer or Director

Date