2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000126275

Entity Name: CENTENNIAL HEALTHCARE OPTIONS, LLC

FILED Jul 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1321 NW 14 ST SUITE 511 MIAMI, FL 33125

Current Mailing Address: New Mailing Address:

1321 NW 14 ST SUITE 511 MIAMI, FL 33125

FEI Number: 26-2112843 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:

RODRIGUEZ, ORLANDO D

1321 NW 14 ST
SUITE 511

DE LA CRUZ SR, FERNANDO V MD
1321 NW 14 ST
SUITE 511

MIAMI, FL 33125 US MIAMI, FL 33125 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: FERNANDO V. DE LA CRUZ

ERNANDO V. DE LA CRUZ 07/15/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: (X) Change () Addition () Delete RODRIGUEZ, ORLANDO D RODRIGUEZ, ORLANDO D MD Name: Name: Address: 1321 NW 14 ST SUITE 511 Address: 1321 NW 14 ST SUITE 511 City-St-Zip: MIAMI, FL 33125 City-St-Zip: MIAMI, FL 33125

Title: MGR () Delete Title: () Change () Addition

 Name:
 DE LA CRUZ, FERNANDO V SR.
 Name:

 Address:
 1321 NW 14 ST SUITE 511
 Address:

 City-St-Zip:
 MIAMI, FL 33125
 City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FERNANDO V. DE LA CRUZ MD MGR 07/15/2008