# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 01, 2012**
**Secretary of State**

DOCUMENT# N08000010756

**Entity Name:** PRO-HEALTH WORLD CARE, INC

**Current Principal Place of Business:**

9700 STIRLING ROAD
SUITE 105B
COOPER CITY, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

9700 STIRLING ROAD
SUITE 105B
COOPER CITY, FL 33326

**New Mailing Address:**

**FEI Number: 65-1202921** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOULD, WAYNE A
4532 SW 126TH AVENUE
MIRAMAR, FL 33027 US

**Name and Address of New Registered Agent:**

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:**

Title: PRES
Name: HARTY, CECELIA D
Address: 10808 GARDENRIDGE CT.
City-St-Zip: DAVIE, FL 33328

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CECELIA HARTY PRES 05/01/2012

Electronic Signature of Signing Officer or Director Date