2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# P00000023934

Entity Name: SUCCESSFUL HEALTHCARE SOLUTIONS, INC.

Current Principal Place of Business:

5580 COACH HOUSE CIRCLE
D
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

PO BOX 812548
BOCA RATON, FL 334812548

New Mailing Address:

FEI Number: 65-1001730 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILGORAN, NATALIE
5580 COACH HOUSE CIRCLE
D
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

WILGOREN, NATALIE
5580 COACH HOUSE CIRCLE
D
BOCA RATON, FL 33486 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: NATALIE WILGOREN 04/24/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WILGOREN, NATALIE
Address: 5580D COACH HOUSE CIRCLE
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NATALIE WILGOREN PRES 04/24/2006
Electronic Signature of Signing Officer or Director Date