

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000093788

Entity Name: ACCESS HEALTH, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

6574 N STATE RD 7
#282
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

Current Mailing Address:

6574 N STATE ROAD 7
#282
DEERFIELD BEACH, FL 33073 US

New Mailing Address:

6574 N STATE ROAD 7
#282
COCONUT CREEK, FL 33073 US

FEI Number: 20-1897740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEIN, PATRICIA ESQ
2001 W. SAMPLE ROAD, STE.
#101
POMPANO BEACH, FL 33064 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: S () Delete
Name: TRICOM PICTURES & PR, ODUCTIONS INC
Address: 6574 N STATE ROAD 7 #282
City-St-Zip: COCONUT CREEK, FL 33073 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: NURIK, SCOTT
Address: 6574 N STATE ROAD 7 #282
City-St-Zip: COCONUT CREEK, FL 33073 US

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: SCOTT NURIK

S

04/28/2006

Electronic Signature of Signing Officer or Director

Date