

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000100367

Entity Name: ABACUS HEALTH SYSTEMS, INC.

FILED
Apr 08, 2005
Secretary of State

Current Principal Place of Business:

6423 COLLINS AVE
1008
MIAMI, FL 33141

New Principal Place of Business:

6423 COLLINS AVE
1008
MIAMI BEACH, FL 33141 US

Current Mailing Address:

6423 COLLINS AVE
1008
MIAMI, FL 33141

New Mailing Address:

6423 COLLINS AVE
1008
MIAMI BEACH, FL 33141 US

FEI Number: 65-1051676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, EDDY F
6423 COLLINS AVE
APT 1008
MIAMI, FL 33141 US

Name and Address of New Registered Agent:

FERNANDEZ, EDDY F PRES
6423 COLLINS AVE
APT 1008
MIAMI BEACH, FL 33141 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: EDDY F. FERNANDEZ

04/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FERNANDEZ, EDDY F
Address: 6423 COLLINS AVE APT 1008
City-St-Zip: MIAMI, FL 33135

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FERNANDEZ, EDDY F PRESIDE
Address: 6423 COLLINS AVE APT 1008
City-St-Zip: MIAMI BEACH, FL 33135 US

Title: SEC () Change (X) Addition
Name: FERNANDEZ, SUSAN P SECRETARY
Address: 6423 COLLINS AVE APT 1008
City-St-Zip: MIAMI BEACH, FL 33135 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDDY F. FERNANDEZ

PRES

04/08/2005

Electronic Signature of Signing Officer or Director

Date