2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000114083

Entity Name: BOCA INTEGRATIVE HEALTH, PA

FILED Jun 19, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
7301 W PALMETTO PARK RD, 203-A BOCA RATON, FL 33433			7301 W PALMETTO PARK RD, 203-A BOCA RATON, FL 33433 US	
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
7301 W PALMETTO PARK RD, 203-A BOCA RATON, FL 33433				
FEI Number: 65-1158341	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
RADER, ANDREW J ESQ. 7510 APPALACHIAN LANE PARKLAND, FL 33067 US		7301 W. PALMETTO PAR STE. 203A	RADER, ANDREW J ESQ. 7301 W. PALMETTO PARK ROAD STE. 203A BOCA RATON, FL 33433 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: ANDREW	RADER		06/19/2009	
Electronic Signature of Registered Agent			Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().				

Title:

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition () Delete ROME, MERYL B M.D. Name: Name: 7510 APPALACHIAN LANE Address: Address: City-St-Zip: PARKLAND, FL 33067 City-St-Zip: Title: () Delete Title: () Change () Addition RADER, ANDREW J Name: Name: Address: 7510 APPALACHIAN LANE Address: PARKLAND, FL 33067 City-St-Zip: 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 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: ANDREW RADER DIR 06/19/2009