

## **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000042377

**FILED**  
**Aug 14, 2011**  
**Secretary of State**

**Entity Name:** CAMOVER INTERNATIONAL GROUP CO.

**Current Principal Place of Business:**

14312 SW 103 TER  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 166335  
MIAMI, FL 331166335 US

**New Mailing Address:**

**FEI Number:** 22-3859367

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEALTH OF AMERICANS FPUNDATION INC  
14312 SW 103 TER  
MIAMI, FL 33186 US

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

HEALTH OF AMERICANS FOUNDATION INC  
14312 SW 103 TER  
MIAMI, FL 33186 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: CARLOS ALVAREZ

08/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ALVAREZ, LIVIA M MS  
Address: PO BOX 166335  
City-St-Zip: MIAMI, FL 331166335

Title: VP  
Name: HEALTH OF AMERICANS FOUNDATION, INC  
Address: PO BOX 166335  
City-St-Zip: MIAMI, FL 331866335 US

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

SIGNATURE: LIVIA ALVAREZ

PD

08/14/2011

Electronic Signature of Signing Officer or Director

Date