2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008
Secretary of State

DOCUMENT# P02000063679

Entity Name: NATURAL BIRTH CHOICES, INC.

Current Principal Place of Business:

16604 NE 3RD AVE
N MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

84 NE 161 STREET
MIAMI, FL 33162

New Mailing Address:

FEI Number: 22-3877340 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLOT, BARBARA D
84 NE 161 STREET
MIAMI, FL 33162 US

Name and Address of New Registered Agent:

DESAMOURS, BARBARA
84 NE 161 STREET
MIAMI, FL 33162 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: BARBARA DESAMOURS 05/02/2008
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 ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BLOT, BARBARA D
Address: 84 NE 161 STREET
City-St-Zip: MIAMI, FL 33162

Title: ST ( ) Delete
Name: DESAMOURS, NATACHA
Address: 1550 NE 191ST UNIT 111
City-St-Zip: MIAMI GARDENS, FL 33179

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DESAMOURS, BARBARA
Address: 84 NE 161 STREET
City-St-Zip: MIAMI, FL 33162

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T ( ) Change (X) Addition
Name: DESAMOURS, DAPHNEY
Address: 871 NE 207 LANE APT 204
City-St-Zip: MIAMI, FL 33179

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: NATACHA DESAMOURS ST 05/02/2008
Electronic Signature of Signing Officer or Director Date