

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000043803

**FILED**  
**Apr 08, 2007**  
**Secretary of State**

**Entity Name:** CHRISTEPH OF BERMUDA GROVE, INC.

**Current Principal Place of Business:**

793 HEALTHCARE DRIVE  
SUITE 102  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

4036 BERMUDA GROVE PLACE  
LONGWOOD, FL 32779

**Current Mailing Address:**

793 HEALTHCARE DR., STE 102  
C/O S. CALDERON, MD  
ORANGE CITY, FL 32763

**New Mailing Address:**

C/O S. CALDERON, MD  
4036 BERMUDA GROVE PLACE  
LONGWOOD, FL 32779

**FEI Number:** 54-2113205

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CALDERON, SANTIAGO W  
793 HEALTHCARE DRIVE  
SUITE 102  
ORANGE CITY, FL 32763 US

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

CALDERON, SANTIAGO W  
4036 BERMUDA GROVE PLACE  
LONGWOOD, FL 32779 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: SANTIAGO W. CALDERON

04/08/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CALDERON, SANTIAGO W  
Address: 793 HEALTHCARE DR STE 102  
City-St-Zip: ORANGE CITY, FL 32763

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CALDERON, SANTIAGO W  
Address: 4036 BERMUDA GROVE PLACE  
City-St-Zip: LONGWOOD, FL 32779

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: SANTIAGO W. CALDERON

MGR

04/08/2007

Electronic Signature of Signing Officer or Director

Date