

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099857

Entity Name: MERCY'S HEALTH, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

175 FOUNTAINBLEAU BLVD.
SUITE 1-A 4
MIAMI, FL 33172

New Principal Place of Business:

8200 N.W. 27 ST
SUITE 117
MIAMI, FL 33122

Current Mailing Address:

175 FOUNTAINBLEAU BLVD.
SUITE 1-A 4
MIAMI, FL 33172

New Mailing Address:

8200 N.W. 27 ST
SUITE 117
MIAMI, FL 33122

FEI Number: 20-0222619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GANUZA, DIEGO
175 FOUNTAINBLEAU BLVD.
SUITE 1-A 4
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

GANUZA, DIEGO
8200 N.W. 27 ST
SUITE 117
MIAMI, FL 33122 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: DIEGO J GANUZA

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MENENDEZ, MERCEDES
Address: 175 FOUNTAINBLEAU BLVD., SUITE 1-A 4
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: BOBES, IGNACIO
Address: 711 SW 26 RD
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MENENDEZ, MERCEDES
Address: 8200 N.W. 27 ST SUITE 117
City-St-Zip: MIAMI, FL 33122

Title: D (X) Change () Addition
Name: BOBES, IGNACIO
Address: 8200 N.W. 27 ST SUITE 117
City-St-Zip: MIAMI, FL 33122

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: MERCEDES MENENDEZ

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date