2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# P03000108775

Entity Name: NEWORLD HEALTH CARE CENTER INC.

Current Principal Place of Business:

407 LINCOLN RD
6K
MIAMI BEACH, FL 33139

New Principal Place of Business:

407 LINCOLN RD
704
MIAMI BEACH, FL 33139

Current Mailing Address:

407 LINCOLN RD
6K
MIAMI BEACH, FL 33139

New Mailing Address:

407 LINCOLN RD
704
MIAMI BEACH, FL 33139

FEI Number: 32-0096785 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOINGS, A ELIZABETH ESQ
4726 ALTON ROAD
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

GOINGS, A ELIZABETH ESQ
2946 BIRD AVENUE
MIAMI, FL 33133 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: A ELIZABETH GOINGS 04/26/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BARBERENA, CARLOS
Address: 12855 SW 72 TERRACE
City-St-Zip: MIAMI,, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CARLOS BARBERENA P 04/26/2006
Electronic Signature of Signing Officer or Director Date