

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000006575

Entity Name: JP HEALTH SERVICES INC.

FILED
Apr 07, 2008
Secretary of State

Current Principal Place of Business:

3104 W. WATERS AVE.
SUITE 205-B
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

3104 W. WATERS AVE.
SUITE 205-B
TAMPA, FL 33614

New Mailing Address:

P.O. BOX 151062
TAMPA, FL 33684

FEI Number: 20-0645743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, JORGE
1902 W. CASS ST.
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

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: JORGE GONZALEZ

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TSOKOS, PETER
Address: 909 MIZZENMAST LANE
City-St-Zip: TAMPA, FL 33602

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: GONZALEZ, JORGE M
Address: 9916 MENANDER WOOD CT
City-St-Zip: ODESSA, FL 33556 US

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: JORGE GONZALEZ

VP

04/07/2008

Electronic Signature of Signing Officer or Director

Date