

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058848

Entity Name: PRO HEALTH GROUP, INC.

FILED  
Jun 29, 2005  
Secretary of State

## Current Principal Place of Business:

11117 W OKEECHOBEE RD STE 129  
HIALEAH GARDENS, FL 33018

## New Principal Place of Business:

## Current Mailing Address:

11117 W OKEECHOBEE RD STE 129  
HIALEAH GARDENS, FL 33018

## New Mailing Address:

FEI Number: 20-0968340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIAZ, OSVALDO J  
7951 SW 40 ST STE 206  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

CASTILLO, JUAN J  
11117 W. OKEECHOBEE RD STE 129  
HIALEAH GARDENS, FL 33018 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: JUAN J. CASTILLO

06/29/2005

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: DPVS ( ) Delete  
Name: RODRIQUEZ, NICHOLAS  
Address: 11117 W OKEECHOBEE RD STE 129  
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: T (X) Delete  
Name: RODRIQUEZ, NICHOLAS  
Address: 11117 W OKEECHOBEE RD STE 129  
City-St-Zip: HIALEAH GARDENS, FL 33018

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: CASTILLO, JUAN J  
Address: 11117 W OKEECHOBEE RD STE 129  
City-St-Zip: HIALEAH GARDENS, FL 33018

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 Section 119.07(3)(i), 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: JUAN J. CASTILLO

PRES

06/29/2005

Electronic Signature of Signing Officer or Director

Date