

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000099338

Entity Name: OPTIMUM HEALTHCARE, INC.

FILED  
Apr 16, 2008  
Secretary of State

## Current Principal Place of Business:

5478 SPRING HILL DRIVE  
SPRING HILL, FL 34606 US

## New Principal Place of Business:

## Current Mailing Address:

5478 SPRING HILL DRIVE  
SPRING HILL, FL 34606 US

## New Mailing Address:

FEI Number: 20-1336412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POLEN, DAN B CEO  
5478 SPRING HILL DRIVE  
SPRING HILL, FL 34606 US

## Name and Address of New Registered Agent:

WILSON, KARREN A ESQ  
5600 MARINER STREET  
227  
TAMPA, FL 33609 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: KARREN WILSON

04/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ST ( ) Delete  
Name: MENEZES, NARESH  
Address: 5478 SPRING HILL DR  
City-St-Zip: SPRING HILL, FL 34606

Title: PCEO (X) Delete  
Name: POLEN, DAN B  
Address: 5478 SPRING HILL DRIVE  
City-St-Zip: SPRING HILL, FL 34606 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PATEL, KIRAN C MD  
Address: 5403 N. CHURCH AVENUE  
City-St-Zip: TAMPA, FL 33614

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

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: KIRAN C. PATEL

P

04/16/2008

Electronic Signature of Signing Officer or Director

Date