2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000153097

Entity Name: BETTER LIFE SUPPORT, INC.

FILED Sep 26, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

4657 N.W. 199TH ST. MIAMI, FL 33055

Current Mailing Address: New Mailing Address:

4657 N.W. 199TH ST. MIAMI, FL 33055

FEI Number: 11-3733423 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. LEGAL FAMILY ACCOUNTING SERV CORP 1840 SW 22ND ST. 342 E 9TH ST 4TH FLOOR SUITE 204 HIALEAH, FL 33010 US MIAMI, FL 33145 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: RAQUEL ROIG 09/26/2007

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: PSTD () Delete Title: (X) Change () Addition FLORIN, MIGUEL A FLORIN, MIGUEL A Name: Name: 4657 N.W. 199TH ST. 4657 N.W. 199TH ST. Address: Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip: MIAMI, FL 33055 US

() Delete Title: VΡ () Change (X) Addition

Title: Name: Name: VARGAS, MARIA D Address: Address: 4657 NW. 199 TH ST MIAMI, FL 33055 US City-St-Zip: 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.

Ρ SIGNATURE: MIGUEL A FLORIN 09/26/2007