2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154761

FILED Mar 28, 2008 Secretary of State

Entity Name: BENSIMON HEALTH CENTER, INC	
Current Principal Place of Business:	New Principal Place of Business:
2303 HOLLYWOOD BLVD. SUITE 12 HOLLYWOOD, FL 33020	
Current Mailing Address:	New Mailing Address:
2303 HOLLYWOOD BLVD. SUITE 12 HOLLYWOOD, FL 33020	
FEI Number: 20-1882966 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent	: Name and Address of New Registered Agent:
RODRIGUEZ, MIGUEL 6473 SW 8 STREET MIAMI, FL 33144 US	
The above named entity submits this statement for t in the State of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered	Agent Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: P () Delete	Title: P (X) Change () Addition

6473 SW 8 STREET Address: 300 BAY VIEW DR # 1506 Address: City-St-Zip: MIAMI, FL 33144 City-St-Zip: SUNNY ISLES BEACH, FL 33160 Title: () Delete Title: (X) Change () Addition ALVAREZ, REYNALDO GALVIS, JONATHAN Name: Name: Address: 10850 SW 81 STREET Address: 300 BAY VIEW DRIVE # 1506 MIAMI, FL 33173 SUNNY ISLES BEACH, FL 33160 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.

SIGNATURE: GALVIS JONATHAN D 03/28/2008