2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000172129

1. Entity Name

ROMINICK HEALTH RESOURCES, INC.



Principal Place of Business

1440 SW 16TH AVE MIAMI, FL 33145 Mailing Address

1800 W 49 ST

HIALEAH, FL 33012

FILED Mar 28, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03232007 No Chg-P		CR2E034 (11/05)		
4. FEI Numbe	r		Applied For	
20-2058	3656		Not Applicable	
5. Certificate of Status Desired			\$8.75 Additional	

6. Name and Address of Current Registered Agent

ROMERO, PETER M 1440 SW 16TH AVE MIAMI, FL 33145

SIGNATURE:

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.								
SIGNATURE				required when reinstating)	DATE			
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROMERO, NYDIA C 1440 SW 16TH AVE MIAMI, FL 33145							
TITLE NAME STREET ADDRESS CITY-ST-ZIP						U00000681023 04/04/07-80025-018 150.00		
TITLE NAME STREET ADDRESS CITY-SY-ZIP					DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN .	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is two and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all their fixe empowered.								