2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000016018

Entity Name: ACCURATE HEALTH & FINANCIAL SERVICES INC.

FILED Apr 01, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6244 HUNTINGTON DRIVE 2211 ASHLEY OAKS CIRCLE ZEPHYRHILLS, FL 33542 US WESLEY CHAPEL, FL 33544 US

Current Mailing Address: New Mailing Address:

6244 HUNTINGTON DRIVE 2211 ASHLEY OAKS CIRCLE ZEPHYRHILLS, FL 33542 US WESLEY CHAPEL, FL 33544 US

FEI Number: 13-4292908 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:

GOTSIS, KONSTANTINOS A

6244 HUNTINGTON DRIVE

ZEPHYRHILLS, FL 33542 US

LEONE, ROBERT V

2211 ASHLEY OAKS CIRCLE

WESLEY CHAPEL, FL 33544 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: ROBERT V. LEONE 04/01/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

 Name:
 LEONE, ROBERT V

 Address:
 2211 ASHLEY OAKS CIRCLE

 City-St-Zip:
 WESLEY CHAPEL, FL 33544

Title: VP

Name: GOTSIS, KONSTANTINOS A Address: 6244 HUNTINGTON DRIVE City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP

 Name:
 O'GRADY, PAUL

 Address:
 1611 E 5 AVE

 City-St-Zip:
 TAMPA, FL 33605 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT V. LEONE P 04/01/2010