

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032471

FILED
May 30, 2006
Secretary of State

Entity Name: COMMUNITY HEALTH AID INC.

Current Principal Place of Business:

3900 NW 79TH AVE
SUITE 322
DORAL, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

3900 NW 79TH AVE
SUITE 322
DORAL, FL 33166 US

New Mailing Address:

FEI Number: 20-2554893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GUTIERREZ, JEANINE
3900 NW 79TH AVE
SUITE 322
DORAL, FL 33166 US

Name and Address of New Registered Agent:

FAJARDO, YUSDENY
3900 NW 79TH AVE
SUITE 322
DORAL, FL 33166 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: YUSDENY FAJARDO

05/30/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: TORRES, DANIEL
Address: 3900 NW 79TH AVE, SUITE 322
City-St-Zip: DORAL, FL 33166 US

Title: VT () Delete
Name: PEREZ, RUBEN
Address: 3900 NW 79TH AVE
City-St-Zip: DORAL, FL 33166 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VT (X) Change () Addition
Name: FAJARDO, YUSDENY
Address: 3900 NW 79TH AVE, SUITE 322
City-St-Zip: DORAL, FL 33166 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL TORRES

P

05/30/2006

Electronic Signature of Signing Officer or Director

Date