2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000076465

Entity Name: VIRGIN HEALTH CORPORATION INC.

FILED Jan 12, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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935 W 49 STREET 7300 CORPORATE CENTER DRIVE SUITE 106 SUITE 702

HIALEAH, FL 33012 MIAMI, FL 33126 US

Current Mailing Address: New Mailing Address:

935 W 49 STREET 7300 CORPORATE CENTER DRIVE

SUITE 106 SUITE 702

HIALEAH, FL 33012 MIAMI, FL 33126 US

FEI Number: 20-2943683 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:

ALMAZAN & RODRIGUEZ, P.A. 2151 LEJEUNE RD - MEZZANINE CORAL GABLES, FL 33134 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:

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

 Name:
 DE LA CRUZ, FERNANDO JR.
 Name:
 DE LA CRUZ, FERNANDO V JR.

 Address:
 935 W 49 STREET, STE. 106
 Address:
 7300 CORPORATE CENTER DRIVE #702

City-St-Zip: HIALEAH, FL 33012 City-St-Zip: MIAMI, FL 33126 US

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: COMPANIONI, ERICH JR. Name: COMPANIONI, ERICH E

Address: 935 W 49 STREET, STE. 106 Address: 7300 CORPORATE CENTER DRIVE # 702

City-St-Zip: HIALEAH, FL 33012 City-St-Zip: MIAMI, FL 33126 US

Title: ST () Delete Title: ST (X) Change () Addition Name: DE LA CRUZ, LUCY Name: DE LA CRUZ, LUCY M

Address: 935 W 49 STREET, STE. 106 Address: 7300 CORPORATE CENTER DRIVE #702

City-St-Zip: HIALEAH, FL 33012 City-St-Zip: MIAMI, FL 33126 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: FERNANDO V DE LA CRUZ JR P 01/12/2007