2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006
Secretary of State

DOCUMENT# P05000110524

Entity Name: AMERICA HEALTHCARE GROUP INC.

Current Principal Place of Business:

315 INDIAN TRACE #150
WESTON, FL 33326

New Principal Place of Business:

318 INDIAN TRACE #150
WESTON, FL 33326

Current Mailing Address:

315 INDIAN TRACE #150
WESTON, FL 33326

New Mailing Address:

318 INDIAN TRACE #150
WESTON, FL 33326

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORRES, MARCELO E
16091 BLAH BLVD. #108
WESTON, FL 33326 US

Name and Address of New Registered Agent:

TORRES, MARCELO E
16091 BLATT BLVD. #108
WESTON, FL 33326 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: 02/06/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: TORRES, MARCELO E
Address: 16091 BLAH BLVD. #108
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARCELO TORRES D 02/06/2006
Electronic Signature of Signing Officer or Director — Date