

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000137428

FILED
Jan 05, 2006
Secretary of State

Entity Name: TRANSIT HEALTH NETWORK, INC.

Current Principal Place of Business:

18120 SW 149 AVE
MIAMI, FL 33187

New Principal Place of Business:

4642 SW 74TH AVENUE
MIAMI, FL 33155

Current Mailing Address:

18120 SW 149 AVE
MIAMI, FL 33187

New Mailing Address:

4642 SW 74TH AVENUE
MIAMI, FL 33155

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

Name and Address of Current Registered Agent:

BAO, LISETTE C
18120 SW 149 AVE
MIAMI, FL 33187 US

Name and Address of New Registered Agent:

IGLESIAS, MANUEL E ESQ.
121 ALHAMBRA PLAZA
10TH FLOOR
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: MANUEL E IGLESIAS, ESQ

01/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAO, LISETTE C
Address: 18120 SW 149 AVE
City-St-Zip: MIAMI, FL 33187

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RIZO, DAYAMI
Address: 4642 SW 74TH AVE.
City-St-Zip: MIAMI, FL 33155

Title: D () Change (X) Addition
Name: RIZO, DAYAMI
Address: 4642 SW 74TH AVE.
City-St-Zip: MIAMI, FL 33155

Title: S () Change (X) Addition
Name: RIZO, DAYAMI
Address: 4642 SW 74TH AVE.
City-St-Zip: MIAMI, FL 33155

Title: VP () Change (X) Addition
Name: BAO, LISETTE
Address: 4642 SW 74TH AVE.
City-St-Zip: MIAMI, FL 33155

Title: D () Change (X) Addition
Name: BAO, LISETTE
Address: 4642 SW 74TH AVE.
City-St-Zip: MIAMI, FL 33155

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: DAYAMI RIZO

P

01/05/2006

Electronic Signature of Signing Officer or Director

Date