2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2007
Secretary of State

DOCUMENT# P06000020041

Entity Name: DALEY-BROWN HEALTH SERVICES, INC.

Current Principal Place of Business:

10760 SW 164 ST
MIAMI, FL 33157

New Principal Place of Business:

9507 SW 160 ST
STE 230
MIAMI, FL 33157

Current Mailing Address:

10760 SW 164 ST
MIAMI, FL 33157

New Mailing Address:

PO BOX 570548
MIAMI, FL 33257

FEI Number: 56-2565031 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, GEORGIETTE S
10760 SW 164 ST
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

BROWN, GEORGIETTE S
9507 SW 160 ST
230
MIAMI, FL 33157 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: 07/11/2007
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: P ( ) Delete
Name: BROWN, GEORGIETTE S
Address: 10760 SW 164 ST
City-St-Zip: MIAMI,, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BROWN, GEORGIETTE S
Address: PO BOX 570548
City-St-Zip: MIAMI,, FL 33257

I hereby certify that the information supplied with this filing does not qualify 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: GEORGIETTE BROWN OWNE 07/11/2007
Electronic Signature of Signing Officer or Director — Date