

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000024084

FILED
Jan 12, 2012
Secretary of State

Entity Name: HEALTHCONNEX CONSULTING, INC.

Current Principal Place of Business:

7791 NW 46 STREET
SUITE 427
DORAL, FL 33166

New Principal Place of Business:

Current Mailing Address:

7791 NW 46 STREET
SUITE 427
DORAL, FL 33166

New Mailing Address:

FEI Number: 71-0998262 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SUAREZ, MARIA
15903 SW 43 STREET
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: SUAREZ, BRUNO J
Address: P.O. BOX 558172
City-St-Zip: MIAMI, FL 33255

Title: VP
Name: SUAREZ, MARIA C
Address: P.O. BOX 558172
City-St-Zip: MIAMI, FL 33255

I hereby 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 all other like empowered.

SIGNATURE: BRUNO SUAREZ

P

01/12/2012

Electronic Signature of Signing Officer or Director

Date