

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000050484

**FILED**  
**Apr 21, 2008**  
**Secretary of State**

**Entity Name:** PEACOCK HEALTH EDUCATIONAL SERVICES, INC.

**Current Principal Place of Business:**

2110 N.W. 173RD TERRACE  
MIAMI GARDENS, FL 33056 US

**New Principal Place of Business:**

99 N.W. 183RD STREET  
SUITE 116  
MIAMI GARDENS, FL 33169 US

**Current Mailing Address:**

2110 N.W. 173RD TERRACE  
MIAMI GARDENS, FL 33056 US

**New Mailing Address:**

99 N.W. 183RD STREET  
SUITE 116  
MIAMI GARDENS, FL 33169 US

**FEI Number:** 56-2653574

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PEACOCK, CYNTHIA A  
2110 N.W. 173RD TERRACE  
MIAMI GARDENS, FL 33056 US

**Name and Address of New Registered Agent:**

PEACOCK, CYNTHIA A  
99 N.W. 183RD STREET  
SUITE 116  
MIAMI GARDENS, FL 33169 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:**

04/21/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PEACOCK, CYNTHIA A  
Address: 2110 N.W. 173RD TERRACE  
City-St-Zip: MIAMI GARDENS, FL 33056 US

Title: VP ( ) Delete  
Name: PEACOCK, HAROLD L  
Address: 2110 N.W. 173RD TERRACE  
City-St-Zip: MIAMI GARDENS, FL 33056 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: PEACOCK, CYNTHIA A  
Address: 99 N.W. 183RD STREET SUITE 116  
City-St-Zip: MIAMI GARDENS, FL 33169 US

Title: COO (X) Change ( ) Addition  
Name: PEACOCK, HAROLD L  
Address: 99 N.W. 183RD STREET SUITE 116  
City-St-Zip: MIAMI GARDENS, FL 33169 US

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:** CYNTHIA A. PEACOCK

CEO

04/21/2008

Electronic Signature of Signing Officer or Director

Date