

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000076628

FILED
Mar 14, 2008
Secretary of State

Entity Name: ADVANCED HEALTH SOLUTIONS, INC.

Current Principal Place of Business:

10106 ROYAL PALM BOULEVARD
CORAL SPRINGS,, FL 33065

New Principal Place of Business:

446 NW 118TH TERRACE
CORAL SPRINGS,, FL 33071

Current Mailing Address:

10106 ROYAL PALM BOULEVARD
CORAL SPRINGS,, FL 33065

New Mailing Address:

446 NW 118TH TERRACE
CORAL SPRINGS,, FL 33071

FEI Number: 20-4985524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLATSOFF, WILLIAM A JR.
10106 ROYAL PALM BOULEVARD
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

CLATSOFF, WILLIAM A JR.
446 NW 118TH TERRACE
CORAL SPRINGS, FL 33071 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:

03/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLATSOFF, WILLIAM A JR.
Address: 10106 ROYAL PALM BOULEVARD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VPST () Delete
Name: CLATSOFF, DEBORAH A
Address: 10106 ROYAL PALM BOULEVARD
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLATSOFF, WILLIAM A JR.
Address: 446 NW 118TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VPST (X) Change () Addition
Name: CLATSOFF, DEBORAH A
Address: 446 NW 118TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

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: DEBORAH CLATSOFF

VPST

03/14/2008

Electronic Signature of Signing Officer or Director

Date