2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P06000077870

Entity Name: ELITE HEALTH AGENCY, INC.

Current Principal Place of Business:

950 SOUTH PINE ISLAND ROAD
A-150
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

950 SOUTH PINE ISLAND ROAD
A-150
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 16-1762848 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DOUGLAS, ESTELLE
1640 NW 93 TERRACE
CORAL SPRINGS, FL 33071 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete
Name: DOUGLAS, ESTELLE
Address: 1640 NW 93 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP ( ) Delete
Name: ROWLEY, GREGORY
Address: 117 SW 96 AVENUE
City-St-Zip: PLANTATION, FL 33324

Title: VP ( ) Delete
Name: ROWLEY, ANNA
Address: 117 SW 96 AVENUE
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: ROWLEY, GREGORY
Address: 1640 NW 93RD TERR
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP (X) Change ( ) Addition
Name: ROWLEY, ANNA
Address: 1640 NW 93RD TERR
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: ANNA ROWLEY VP 04/30/2008

Electronic Signature of Signing Officer or Director Date