2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000134748

Entity Name: MORIAH HEALTH SYSTEMS, INC

HOMESTEAD, FL 33032

City-St-Zip:

FILED Jan 02, 2007 Secretary of State

Linuty Na	IIIC. WORLAN	TILALTITOTOTLING, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	IXIE HIGHWA EAD, FL 33032	•			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	IXIE HIGHWA EAD, FL 33032				
FEI Number	: 20-5764324	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered A					
9032 SW 7 MIAMI, FL The above		Т	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI					
		ic Signature of Registered Ac	gent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () ERROL, DUNC 8395 SW 163R MIAMI, FL 331	D TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (X NANCY, MORR 27104 S DIXIE		Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ERROL L. DUNCAN D 01/02/2007