2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008
Secretary of State

DOCUMENT# P06000134837

Entity Name: SYLVA HEALTHCARE PLUS, INC.

Current Principal Place of Business:

27119 MATHESON AVE
208
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

27119 MATHESON AVE
208
BONITA SPRINGS, FL 34135 US

New Mailing Address:

13874 SORANO CT.
ESTERO, FL 33928 US

FEI Number: 20-5769162 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SYLVA, THIERRY J
27119 MATHESON AVE
208
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

SYLVA, THIERRY J
13874 SORANO CT.
ESTERO, FL 33928 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: 01/22/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete
Name: SYLVA, THIERRY J
Address: 27119 MATHESON AVE 208
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: D ( ) Delete
Name: SYLVA, THIERRY J
Address: 27119 MATHESON AVE 208
City-St-Zip: BONITA SPRINGS, FL 34135 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition
Name: SYLVA, THIERRY J
Address: 13874 SORANO CT.
City-St-Zip: ESTERO, FL 33928 US

Title: D (X) Change ( ) Addition
Name: SYLVA, THIERRY J
Address: 13874 SORANO CT.
City-St-Zip: ESTERO, FL 33928 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: THIERRY J. SYLVA PVST 01/22/2008
Electronic Signature of Signing Officer or Director — Date