

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000147919

Entity Name: RGR HEALTH SERVICES, CORP.

FILED
Oct 23, 2008
Secretary of State

Current Principal Place of Business:

9049 NW 117 TERRACE
HIALEAH GARDENS, FL 33018

New Principal Place of Business:

8300 WEST FLAGLER STREET
SUITE 200
MIAMI, FL 33144

Current Mailing Address:

9049 NW 117 TERRACE
HIALEAH GARDENS, FL 33018

New Mailing Address:

8300 WEST FLAGLER STREET
SUITE 200
MIAMI, FL 33144

FEI Number: 20-5952893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, ELIZABETH
9049 NW 117 TERRACE
HIALEAH GARDENS, FL 330184142 US

Name and Address of New Registered Agent:

GONZALEZ, ELIZABETH
10451 WEST OKEECHOBEE ROAD
APT 303
HIALEAH GARDENS, FL 33018 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:

10/23/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTE () Delete
Name: GONZALEZ, RAUL F
Address: 9049 NW 117 TERRACE
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: VPTE () Delete
Name: GONZALEZ, ELIZABETH
Address: 9049 NW 117 TERRACE
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: DIR () Delete
Name: LOPEZ, ROBERTO L
Address: 9049 NW 117 TERRACE
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: DIR (X) Delete
Name: ARMENTEROS, RAUL
Address: 9049 NW 117 TERRACE
City-St-Zip: HIALEAH GARDENS, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTE (X) Change () Addition
Name: GONZALEZ, RAUL F
Address: 8300 WEST FLAGLER STREET SUITE 200
City-St-Zip: MIAMI, FL 33144

Title: VPTE (X) Change () Addition
Name: GONZALEZ, ELIZABETH
Address: 8300 WEST FLAGLER STREET SUITE 200
City-St-Zip: MIAMI, FL 33144

Title: DIR (X) Change () Addition
Name: ARMENTEROS, RAUL
Address: 8300 WEST FLAGLER STREET SUITE 200
City-St-Zip: MIAMI, FL 33144

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

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: RAUL F GONZALEZ

PTE

10/23/2008

Electronic Signature of Signing Officer or Director

Date