2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000150911

Entity Name: PREMIER HEALTH SOLUTIONS, INC.

FILED Dec 18, 2007 Secretary of State

Current Pri	ncipal Pla	ce of Business:	New Principal Place of	New Principal Place of Business:	
6555 NW 36ST #328 VIRGINIA GARDENS, FL 33166			1490 W 49 PLACE SUITE 210 HIALEAH, FL 33012		
Current Mai	iling Add	ress:	New Mailing Address:	New Mailing Address:	
6555 NW 36 VIRGINIA GA		FL 33166	1490 W 49 PLACE SUITE 210 HIALEAH, FL 33012		
FEI Number: 2	0-8012833	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and A	Address o	f Current Registered Agent:	Name and Address of N	nd Address of New Registered Agent:	
CASTELLAN 317 E 9 ST HIALEAH, FI		GIO L 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	E: SERG	O L CASTELLANOS			
	Elect	ronic Signature of Registered Age	ent	Date	
		.193(2)(b), F.S., the corporation did no cing Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS	AND DIRI	ECTORS:	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	PVST	() Delete	Title: () Change ()Addition	

Title: PVST () Delete Title:
Name: CASTELLANOS, SERGIO L Name:

 Name:
 CASTELLANOS, SENGIO E
 Name:

 Address:
 317 E 9 STREET
 Address:

 City-St-Zip:
 HIALEAH, FL 33010
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 CASTELLANOS, SERGIO L
 Name:

 Address:
 317 E 9 STREET
 Address:

 City-St-Zip:
 HIALEAH, FL 33010
 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: SERGIO L CASTELLANOS PRS 12/18/2007