

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000153281

Entity Name: SAPPHIRE HEALTH CENTER INC.

FILED
Mar 12, 2008
Secretary of State

Current Principal Place of Business:

169 TEQUESTA DRIVE, SUITE E11
JUPITER, FL 33458

New Principal Place of Business:

3939 NW 7 STREET
206
MIAMI, FL 33126

Current Mailing Address:

169 TEQUESTA DRIVE, SUITE E11
JUPITER, FL 33458

New Mailing Address:

3939 NW 7 STREET
206
MIAMI, FL 33126

FEI Number: 20-8100877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, GUILLERMO A
290 WOODBRINE APT 210
RIVERA BEACH, FL 334186541 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: PVST () Delete
Name: RODRIGUEZ, GUILLERMO A
Address: 290 WOODBRINE APT 210
City-St-Zip: RIVERA BEACH, FL 334186541

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ULIN, LUIS S
Address: 3939 NW 7 STREET
City-St-Zip: MIAMI, FL 33126

Title: VPD () Change (X) Addition
Name: VALLENCIA, NESTER D
Address: 251 SW 122 AVE
City-St-Zip: MIAMI, FL 33126

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: LUIS SCOTT ULIN

PD

03/12/2008

Electronic Signature of Signing Officer or Director

Date