2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011876

Entity Name: EXCLUSIVE SOLUTIONS OF HEALTH INC

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

Current Mailing Address: New Mailing Address:

11591 N W 2ND STREET 15144 SW 11 LN APT. NO. 104 MIAMI, FL 33194 MIAMI, FL 33172

FEI Number: 02-0798736 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 SOLER, GISELLE
 11591 N W 2ND STREET
 15144 SW 11 LN

 APT. NO. 104
 MIAMI, FL 33194 US

 MIAMI, FL 33172 US
 WIAMI, FL 33194 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: GISELLE SOLER 04/02/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST () Delete Title: PVST (X) Change () Addition Name: SOLER, GISELLE SOLER, GISELLE

 Name:
 SOLER, GISELLE
 Name:
 SOLER, GISELLE

 Address:
 11591 N W 2ND STREET APT. NO 104
 Address:
 15144 SW 11 LN

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:
 MIAMI, FL 33194

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: GISELLE SOLER PVST 04/02/2009