

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000028083

Entity Name: B & G HEALTH CARE CORP.

FILED
Jan 14, 2008
Secretary of State

Current Principal Place of Business:

10000 NW 80 CT #2251
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

16025 NW 64 AVE #209
MIAMI LAKES, FL 33014

Current Mailing Address:

10000 NW 80 CT #2251
HIALEAH GARDENS, FL 33016

New Mailing Address:

16025 NW 64 AVE #209
MIAMI LAKES, FL 33014

FEI Number: 01-0887466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIN SOLER, JOSE A
10000 NW 80 CT #2251
HIALEAH GARDENS, FL 33016 US

Name and Address of New Registered Agent:

BLAIN SOLER, JOSE A
16025 NW 64 AVE #209
MIAMI LAKES, FL 33014 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:

01/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLAIN SOLER, JOSE A
Address: 10000 NW 80 CT #2251
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: V () Delete
Name: GONZALEZ, MILEIDYS G
Address: 10000 NW 80 CT #2251
City-St-Zip: HIALEAH GARDENS, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLAIN SOLER, JOSE A
Address: 16025 NW 64 AVE #209
City-St-Zip: MIAMI LAKES, FL 33014

Title: V (X) Change () Addition
Name: GONZALEZ, MILEIDYS G
Address: 16025 NW 64 AVE #209
City-St-Zip: MIAMI LAKES, FL 33014

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: JOSE BLAIN SOLER

P

01/14/2008

Electronic Signature of Signing Officer or Director

Date