

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000062984

FILED
Jul 17, 2008
Secretary of State

Entity Name: ABG PROFESSIONAL HEALTH SERVICES, INC.

Current Principal Place of Business:

8584 SW 8TH ST
MIAMI, FL 33144

New Principal Place of Business:

8300 WEST FLAGLER STREET
SUITE 200
MIAMI, FL 33144

Current Mailing Address:

8584 SW 8TH ST
MIAMI, FL 33144

New Mailing Address:

8300 WEST FLAGLER STREET
SUITE 200
MIAMI, FL 33144

FEI Number: 26-0253467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENITEZ, JORGE
8584 SW 8TH ST
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

BENITEZ, JORGE
8300 WEST FLAGLER STREET
SUITE 200
MIAMI, FL 33144 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:

07/17/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REYES, CARMEN
Address: 8584 SW 8TH ST
City-St-Zip: MIAMI, FL 33144

Title: VPD () Delete
Name: BENITEZ, JORGE
Address: 8584 SW 8TH ST
City-St-Zip: MIAMI, FL 33144

Title: VPD () Delete
Name: GONZALEZ, GISELLE
Address: 8584 SW 8TH ST
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REYES, CARMEN
Address: 8300 WEST FLAGLER ST SUITE 200
City-St-Zip: MIAMI, FL 33144

Title: VPD (X) Change () Addition
Name: BENITEZ, JORGE
Address: 8300 WEST FLAGLER ST SUITE 200
City-St-Zip: MIAMI, FL 33144

Title: VPD (X) Change () Addition
Name: GONZALEZ, GISELLE
Address: 8300 WEST FLAGLER ST SUITE 200
City-St-Zip: MIAMI, FL 33144

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: CARMEN REYES

VPD

07/17/2008

Electronic Signature of Signing Officer or Director

Date