

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000067932

FILED  
Apr 09, 2008  
Secretary of State

Entity Name: DOCTOR HEALTH CARD CORP

## Current Principal Place of Business:

881 EAST 2ND AVENUE  
HIALEAH, FL 33010

## New Principal Place of Business:

## Current Mailing Address:

881 EAST 2ND AVENUE  
HIALEAH, FL 33010

## New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASSIDY, BERNARD M  
ONE EAST BROWARD BLVD  
1410  
FT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

TRIMINO, JAMILET  
881 EAST 2ND AVENUE  
HIALEAH, FL 33010 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: JAMILET TRIMINO

04/09/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TRIMINO, EDUARDO J  
Address: 881 EAST 2ND AVENUE  
City-St-Zip: HIALEAH, FL 33010

Title: VP (X) Delete  
Name: MESA, BARBARA  
Address: 881 EAST 2ND AVE  
City-St-Zip: HIALEAH, FL 33010

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: TRIMINO, JAMILET  
Address: 881 EAST 2ND AVENUE  
City-St-Zip: HIALEAH, FL 33010

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMILET TRIMINO

P

04/09/2008

Electronic Signature of Signing Officer or Director

Date