

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068521

Entity Name: SALUD-HABLES, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

9990 S.W. 77TH AVENUE
SUITE 330
MIAMI, FL 331562661

Current Mailing Address:

9990 S.W. 77TH AVENUE
SUITE 330
MIAMI, FL 331562661

New Principal Place of Business:

901 CRANDON BLVD.
SUITE 201
KEY BISCAYNE, FL 33149 US

New Mailing Address:

901 CRANDON BLVD.
SUITE 201
KEY BISCAYNE, FL 33149 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARGOLIS, JOHN A ESQUIRE
9990 S.W. 77TH AVE
SUITE 330
MIAMI, FL 331562661 US

Name and Address of New Registered Agent:

QUESADA, PABLO S
2333 PONCE DE LEON BLVD
SUITE 302
CORAL GABLES, FL 33134 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: PABLO S. QUESADA

05/01/2008

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: D () Delete
Name: RESTREPO, PATRICIA
Address: 9990 S.W. 77TH AVE, SUITE 330
City-St-Zip: MIAMI, FL 331562661

Title: D () Delete
Name: ZULUAGA, PATRICIA
Address: 9990 S.W. 77TH AVE, SUITE 330
City-St-Zip: MIAMI, FL 331562661

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: RESTREPO, PATRICIA
Address: 1065 KANE CONCOURSE, SUITE 201
City-St-Zip: BAY HARBOR, FL 33154 US

Title: VPTD (X) Change () Addition
Name: ZULUAGA, PATRICIA
Address: 901 CRANDON BLVD., SUITE 201
City-St-Zip: KEY BISCAYNE, FL 33149 US

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: PATRICIA RESTREPO

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05/01/2008

Electronic Signature of Signing Officer or Director

Date