## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000086822

Entity Name: MIRTHAS HEALTH CARE INC.

FILED Jul 09, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

3801 NW 7TH AVE 14423 NW 87TH PLACE POMPANO BEACH, FL 33064 US MAIMI, FL 33018 US

Current Mailing Address: New Mailing Address:

3801 NW 7TH AVE 14423 NW 87TH PLACE POMPANO BEACH, FL 33064 US MIAMI, FL 33018 US

FEI Number: 26-0636438 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:

CURBELO, MILEYDIS M
3801 NW 7TH AVE
POMPANO BEACH, FL 33064 US

CURBELO, MILEYDIS M
14423 NW 87 PLACE
MIAMI, FL 33018 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: MILEYDIS CURBELO 07/09/2008

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: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 CURBELO, MILEYDIS M
 Name:
 CURBELO, MILEYDIS M

 Address:
 3801 NW 7TH AVE
 Address:
 14423 NW 87 PLACE

 City-St-Zip:
 POMPANO BEACG, FL 33064 US
 City-St-Zip:
 MIAMI, FL 33018 US

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 SANCHEZ, HERNAN
 Name:
 SANCHEZ, HERNAN

 Address:
 3801 NW 7TH AVE
 Address:
 14423 NW 87TH PLACE

 City-St-Zip:
 POMPANO BEACH, FL 33064 US
 City-St-Zip:
 MIAMI, FL 33018 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: MILEYDIS M CURBELO P 07/09/2008