

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 02, 2009
Secretary of State**

DOCUMENT# P07000116709

Entity Name: BETTER HEALTH CARE ENTERPRISES, INC.

Current Principal Place of Business:

1115 THOMPSON AVENUE
LEHIGH ACRES, FL 33972 US

New Principal Place of Business:

103 RIVIERA STREET
LEHIGH ACRES, FL 33936 US

Current Mailing Address:

1115 THOMPSON AVENUE
LEHIGH ACRES, FL 33972 US

New Mailing Address:

103 RIVIERA STREET
LEHIGH ACRES, FL 33936 US

FEI Number: 26-1289522 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, MORRIE I
3230 STIRLING ROAD
2
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

WHYTE, NEBERT P
103 RIVIERA STREET
LEHIGH ACRES, FL 33936.... 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: NEBERT WHYTE 04/02/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAMPBELL, DAPHNE
Address: 1115 THOMPSON AVENUE
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: VP () Delete
Name: JONES, KIESHER
Address: 1115 THOMPSON AVENUE
City-St-Zip: LEHIGH ACRES, FL 33971 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WHYTE, NEBERT P MRS.
Address: 103 RIVIERA STREET
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: VP (X) Change () Addition
Name: WHYTE, NEBERT P MRS.
Address: 103 RIVIERA STREET
City-St-Zip: LEHIGH ACRES, FL 33936 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: NEBERT WHYTE DIR 04/02/2009
Electronic Signature of Signing Officer or Director Date