2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2010
Secretary of State

DOCUMENT# P08000009769

Entity Name: RISK HEALTH, INC.

Current Principal Place of Business:

1208 WEST NEWPORT CENTER DRIVE
202
DEERFIELD, FL 33442

New Principal Place of Business:

Current Mailing Address:

3876 SHERIDAN STRET
HOLLYWOOD, FL 33021

New Mailing Address:

1208 WEST NEWPORT CENTER DRIVE
202
DEERFIELD, FL 33442

FEI Number: 26-1926596 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARTZ, GREGORY
3876 SHERIDAN STREET
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P
Name: RISK INSURANCE AND REINSURANCE SOLUTIONS I
Address: 1208 WEST NEWPORT CENTER DRIVE
City-St-Zip: DEERFIELD, FL 33442

Title: VP
Name: LIBAN, INAYA
Address: 1208 WEST NEWPORT CENTER DRIVE
City-St-Zip: DEERFIELD, FL 33442

I hereby 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 all other like empowered.

SIGNATURE: RISK INSURANCE AND REINSURANCE SOLUTIONS PRES 02/24/2010

Electronic Signature of Signing Officer or Director Date