2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026925

Entity Name: LOVING HEALTH SERVICES INC.

FILED Feb 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1201 SW 1 APT. J 403 PEMBROK		33027			
Current Mailing Address:			New Mailing Address:		
1201 SW 1 APT. J 403 PEMBROK		33027			
FEI Number:	26-2214832	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address of	lame and Address of New Registered Agent:	
DE ERBITI 1201 SW 1 APT. J 403 PEMBROK	41 AVE.	33027 US			
	named entity of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	nic Signature of Registered Ag	gent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DE ERBITI, YE 1201 SW 1417) Delete NY AVE. APT. J 403 NES, FL 33027	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CAMACHO, ISA 1201 SW 141 A) Delete ABEL AVE. APT. J 403 NES, FL 33027	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: YENY DE ERBITI P 02/13/2009