

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000057130

FILED
Feb 10, 2010
Secretary of State

Entity Name: VISION MENTAL HEALTH CARE INC.

Current Principal Place of Business:

9869 PINES BLVD.
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

9869 PINES BLVD.
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 61-1600523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELLO, NILLY O
11973 SW 17 CT.
MIRAMAR, FL 33025 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: GOMEZ, CARLOS D
Address: 11973 SW 17 CT
City-St-Zip: MIRAMAR, FL 33025 US

Title: VP
Name: BELLO, NILLY O
Address: 11973 SW 17 CT
City-St-Zip: MIRAMAR, FL 33025 US

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: NILLY O BELLO

VP

02/10/2010

Electronic Signature of Signing Officer or Director

Date