

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000024762

FILED
Apr 14, 2011
Secretary of State

Entity Name: COMPREHENSIVE HEALTH SOLUTIONS, INC.

Current Principal Place of Business:

739 LAKE BLVD
WESTON, FL 33326

New Principal Place of Business:

3239 PORT ROYALE DR S
APT K
FT. LAUDERDALE, FL 33308

Current Mailing Address:

739 LAKE BLVD
WESTON, FL 33326

New Mailing Address:

3239 PORT ROYALE DR S
APT K
FT. LAUDERDALE, FL 33308

FEI Number: 80-0567194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWEEDY, AHMED A DR.
739 LAKE BLVD
WESTON, FL 33326 US

Name and Address of New Registered Agent:

HOWEEDY, AHMED A DR.
3239 PORT ROYALE DR S
APT K
FT. LAUDERDALE, FL 33308 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: AHMED HOWEEDY

04/14/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HOWEEDY, AHMED A DR.
Address: 3239 PORT ROYALE DR S APT K
City-St-Zip: FT. LAUDERDALE, FL 33308

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: AHMED HOWEEDY

P

04/14/2011

Electronic Signature of Signing Officer or Director

Date