

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000036978

FILED
Apr 30, 2012
Secretary of State

Entity Name: BETTER HEALTH MANAGEMENT, INC.

Current Principal Place of Business:

1701 PONCE DE LEON BLVD,
SUITE 300
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

1701 PONCE DE LEON BLVD,
SUITE 300
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 32-0333494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC
11380 PROSPERITY FARMS
ROAD # 221E
PALM BEACH GARDENS,, FL 33410 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

OFFICERS AND DIRECTORS:

Title: P
Name: FERNANDEZ, MIGUEL B
Address: 121 ALHAMBRA PLAZA, SUITE 1100
City-St-Zip: CORAL GABLES, FL 33134

Title: VPTD
Name: CABRERA, MARCIO C
Address: 1701 PONCE DE LEON BLVD, SUITE 300
City-St-Zip: CORAL GABLES, FL 33134

Title: D
Name: JIMENEZ, PETER
Address: 1701 PONCE DE LEON BLVD, SUITE 300
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD
Name: RICO, JORGE L
Address: 121 LAHAMBRA PLAZA SUITE 1100
City-St-Zip: CORAL GABLES, FL 33134

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: MARCIO CABRERA

D

04/30/2012

Electronic Signature of Signing Officer or Director

Date