

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000007813

FILED
Mar 26, 2008
Secretary of State

Entity Name: PACER HEALTH CORPORATION

Current Principal Place of Business:

7759 N.W. 146 STREET
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:

7759 N.W. 146 STREET
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 11-3144463 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JURADO, ALFREDO
1001 EAST SAMPLE ROAD
SUITE 9E
POMPANO BEACH, FL 33064 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: PSD () Delete
Name: GONZALEZ, RAINIER
Address: 7759 NW 16 STREET
City-St-Zip: MIAMI LAKES, FL 33016

Title: D () Delete
Name: JURADO, ALFREDO
Address: 1001 EAST SAMPLE ROAD, SUITE 9E
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: PANTALEON, ERIC
Address: 7761 NW 146 STREET
City-St-Zip: MIAMI LAKES, FL 33016

Title: D () Delete
Name: MARCELO, LLORENTE
Address: 13701 SW 88 STREET
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: EUGENE, MARINI
Address: 7759 NW 146 STREET
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RAINIER GONZALEZ

PSD

03/26/2008

Electronic Signature of Signing Officer or Director

Date