

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000041495

FILED
Jan 10, 2005
Secretary of State

Entity Name: ROSS INTEGRAL HEALTH CENTER, INC.

Current Principal Place of Business:

1730 SW 97 AVE
MIAMI, FL 33165

New Principal Place of Business:

2919 SW 110 AVE
MIAMI, FL 33165

Current Mailing Address:

P.O. BOX
126218
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 65-0416421 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOCORRO, PRUDENCIO
1730 SW 97 AVE.
MIAMI, FL 33168 US

Name and Address of New Registered Agent:

SOCORRO, PRUDENCIO
2919 SW 110 AVE
MIAMI, FL 33165 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: PRUDENCIO SOCORRO

01/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOCORRO, PRUDENCIO
Address: 2200 SW 16 STREET
City-St-Zip: MIAMI, FL 33145

Title: VP () Delete
Name: VALDEZ, ROSA M
Address: 2200 SW 116 STREET SUITE 122
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SOCORRO, PRUDENCIO
Address: 2919 SW 110 AVE
City-St-Zip: MIAMI, FL 33165

Title: VP (X) Change () Addition
Name: VALDEZ, ROSA M
Address: 2919 SW 110 AVE
City-St-Zip: MIAMI, FL 33165

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PRUDENCIO SOCORRO

PD

01/10/2005

Electronic Signature of Signing Officer or Director

Date