2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000053041

Entity Name: EXECUTIVE HEALTH CARE, INC.

FILED Apr 13, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
13304 GLENMOOR DR WEST PALM BEACH, FL 33409			1801 S.E. HILLMOOR DR PORT ST. LUCIE, FL 34952	
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
P.O. BOX 2335 JUPITER, FL 3346823	35			
FEI Number: 65-0571578	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
FREEMAN, ALINA 3687 BARBADOS AVE COOPER CITY, FL 33				
The above named entit in the State of Florida.	y submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financ	ing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: P Name: ZAMEK, ALB	()Delete ERT	Title: Name:	() Change () Addition	

Name: ZAMEK, ALBERT Name:
Address: 13304 GLENMOON DR Address:
City-St-Zip: WEST PALM BEACH, FL 33409 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: ALBERT ZAMEK PRES 04/13/2008