2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000053041

Entity Name: EXECUTIVE HEALTH CARE, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: 1801 S.E. HILLMOOR DR		New Principal Place of Business:		
		New Fillicipal Flace C	u Dusilless.	
PORT ST. LUCIE, FL 34	952			
Current Mailing Address:		New Mailing Address:		
P.O. BOX 2335 JUPITER, FL 334682335	j			
FEI Number: 65-0571578	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of C	Surrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
FREEMAN, ALINA 3687 BARBADOS AVE COOPER CITY, FL 3302	e6 US			
The above named entity s in the State of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: P () Name: ZAMEK, ALBER	Delete RT	Title: () 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 P 04/27/2009