

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000065621

FILED  
Apr 15, 2004  
Secretary of State

Entity Name: BIO HEALTH INTERNATIONAL CORPORATION

## Current Principal Place of Business:

2050 NE 163RD CT  
2ND FLOOR  
NORTH MIAMI BEACH, FL 33162

## Current Mailing Address:

P.O. BOX 601727  
NORTH MIAMI BEACH, FL 331601727

## New Principal Place of Business:

2050 NE 163RD ST. # 203  
2ND FLOOR  
NORTH MIAMI BEACH, FL 33162

## New Mailing Address:

2050 NE 163 RD ST. # 203  
2ND FLOOR  
NORTH MIAMI BEACH, FL 33162

FEI Number: 65-0526454

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROTH, LEONARDO A  
9350 SOUTH DIXIE HWY.  
PENTHOUSE TWO  
MIAMI, FL 33156 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: P ( ) Delete  
Name: ROTH, LEONARDO A.  
Address: 9350 SOUTH DIXIE HWY PA-2  
City-St-Zip: MIAMI, FL

Title: V ( ) Delete  
Name: RUIZ, JUAN  
Address: 2050 NE 163RD ST  
City-St-Zip: N MIAMI BCH, FL 33162

Title: D ( ) Delete  
Name: DE CORTADA, RAMON  
Address: 2050 NE 163RD ST #203  
City-St-Zip: N MIAMI BCH, FL 33162

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ROTH, LEONARDO A  
Address: 9350 SOUTH DIXIE HWY PA-2  
City-St-Zip: MIAMI, FL

Title: V (X) Change ( ) Addition  
Name: RUIZ, JUAN  
Address: 2050 NE 163RD ST # 203  
City-St-Zip: N MIAMI BEACH, FL 33162

Title: D (X) Change ( ) Addition  
Name: DE CORTADA, RAMON  
Address: 2050 NE 163RD ST # 203  
City-St-Zip: N MIAMI BEACH, FL 33162

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: RAMON DE CORTADA

ENG

04/15/2004

Electronic Signature of Signing Officer or Director

Date