

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000074875

FILED
Feb 14, 2005
Secretary of State

Entity Name: OPPORTUNITY HEALTH SERVICES CORP.

Current Principal Place of Business:

175 FOUNTAINBLEU BOUELVARD
SUITE 1G4
MIAMI, FL 33172 US

New Principal Place of Business:

7310 NW 41 ST
MIAMI, FL 33166 US

Current Mailing Address:

175 FOUNTAINBLEU BOUELVARD
SUITE 1G4
MIAMI, FL 33172 US

New Mailing Address:

7310 NW 41 ST.
MIAMI, FL 33166 US

FEI Number: 65-0520885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, MARIA D
175 FOUNTAINBLEU BOUELVARD
1G4
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

GONZALEZ, MARIA D
7310 NW 41 ST.
MIAMI, FL 33166 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: MARIA D. GONZALEZ

02/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, MARIA D
Address: 175 FOUNTAINBLEU BOUELVARD, 1G4
City-St-Zip: MIAMI, FL 33172 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, MARIA D
Address: 7310 NW 41 ST.
City-St-Zip: MIAMI, FL 33166 US

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: MARIA D. GONZALEZ

P

02/14/2005

Electronic Signature of Signing Officer or Director

Date