

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000012157

FILED
Feb 27, 2008
Secretary of State

Entity Name: INTERNATIONAL HEALTHCARE INSTITUTE, INC.

Current Principal Place of Business:

1930-A E SUNRISE BLVD
FT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

1930-A E SUNRISE BLVD
FT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 65-0556056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEN, CHAO
1930-A E SUNRISE BLVD
FT LAUDERDALE, FL 33304 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: DC () Delete
Name: XIAO, JENNY
Address: 1930-1 E SUNRISE BLVD
City-St-Zip: FT LAUDERDALE, FL 33304

Title: DS () Delete
Name: CHEN, CHAO
Address: 1930-A EAST SUNRISE BLVD.
City-St-Zip: FT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: XIAO, JENNY
Address: 1930-A E SUNRISE BLVD
City-St-Zip: FT LAUDERDALE, FL 33304

Title: () Change () Addition
Name:
Address:
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: CHAO CHEN

D S

02/27/2008

Electronic Signature of Signing Officer or Director

Date