

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000046074

FILED
Oct 06, 2005
Secretary of State

Entity Name: COMPREHENSIVE NATURAL HEALTH CORP.

Current Principal Place of Business:

6850 S.W. 24 STREET
SUITE 507
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

6850 S.W. 24 STREET
SUITE 507
MIAMI, FL 33155 US

New Mailing Address:

FEI Number: 65-0594624 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HERNANDEZ, JOSE A
6850 S.W. 24 STREET
SUITE 507
MIAMI, FL 33155 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: JOSE A. HERNANDEZ

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HERNANDEZ, JOSE A
Address: 6850 S.W. 24 STREET
City-St-Zip: MIAMI, FL 33155 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSE A. HERNANDEZ

Electronic Signature of Signing Officer or Director

RA

10/06/2005

Date