

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000049899

Entity Name: NATIONAL HEALTH PARTNERS, INC.

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

1525 NW 3RD ST
STE 2
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

1525 NW 3RD ST
STE 2
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 65-0774374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOBLE, JONATHAN
3150 NW 60TH STREET
BOCA RATON, FL 33496 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: SOBLE, JONATHAN
Address: 3150 NW 60TH STREET
City-St-Zip: BOCA RATON, FL 33496

Title: V () Delete
Name: RUBIN, ERIC
Address: 10897 BAL HARBOR DRIVE
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JONATHAN SOBLE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date