

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000065296

FILED
Apr 09, 2009
Secretary of State

Entity Name: NEW ERA HEALTH CENTER I.O.P., INC.

Current Principal Place of Business:

9600 SW 8TH STREET
SUITE #1
MIAMI, FL 33174 US

New Principal Place of Business:

Current Mailing Address:

9600 SW 8TH STREET
SUITE #1
MIAMI, FL 33174 US

New Mailing Address:

FEI Number: 65-0852411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MUSA, BARBARA G
10041 WEST SUBURAN DRIVE
PINECREST, 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: CEOA () Delete
Name: GARCIA, ENRIQUE A
Address: 9748 SW 154 CT
City-St-Zip: MIAMI, FL 33196

Title: VPD () Delete
Name: GARCIA, VERENA F
Address: 9748 SW 154TH CT
City-St-Zip: MIAMI, FL 33196

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: ENRIQUE A. GARCIA

CEO

04/09/2009

Electronic Signature of Signing Officer or Director

Date