

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V16461

FILED
Jul 11, 2004
Secretary of State

Entity Name: AFFORDABLE HEALTH AND LIFE SERVICES, INC.

Current Principal Place of Business:

13264 LAKESIDE TERRACE
COOPER CITY, FL 33330 US

New Principal Place of Business:

5238 SW 122ND TERRACE
COOPER CITY, FL 33330 US

Current Mailing Address:

5722 S FLAMINGO RD
ST #200
COOPER CITY, FL 33330 US

New Mailing Address:

5722 S FLAMINGO RD
#200
COOPER CITY, FL 33330 US

FEI Number: 65-0314970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KODISH, RENEE
5238 SW 122ND TERRACE
COOPER CITY, FL 33330 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

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: KODICH, BARRY H
Address: 5238 SW 122ND TERRACE
City-St-Zip: COOPER CITY, FL 33330

Title: S (X) Delete
Name: KODICH, RENEE
Address: 5238 SW 122ND TERRACE
City-St-Zip: COOPER CITY, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KODISH, BARRY H
Address: 5238 SW 122ND TERRACE
City-St-Zip: COOPER CITY, FL 33330

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: BARRY KODISH

P

07/11/2004

Electronic Signature of Signing Officer or Director

Date