2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2014
Secretary of State
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Entity Name: CHIROMED HEALTH ALLIANCE, INC.

Current Principal Place of Business:

1800 N FEDERAL HWY
SUITE 105
POMPANO BEACH, FL 33062

Current Mailing Address:

24 NE 24TH AVE
SUITE 100
POMPANO BEACH, FL 33062

FEI Number: 27-0001141

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIGIORGIO, NATHALIE MDC
24 NE 24TH AVENUE
POMPANO BEACH, FL 33062 US

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

Officer/Director Detail :

Title	P	Title	V
Name	DIGIORGIO, NATHALIE MDC	Name	DIGIORGIO, THOMAS HJR.
Address	24 NE 24TH AVENUE	Address	24 NE 24TH AVENUE
City-State-Zip:	POMPANO BEACH FL 33062	City-State-Zip:	POMPANO BEACH FL 33062

I hereby 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 all other like empowered.

SIGNATURE: DR. NATHALIE DIGIORGIO PRES 01/14/2014

Electronic Signature of Signing Officer/Director Detail — Date