

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000090829

**Entity Name:** HEALTH ALLIANCE GROUP INC.

**Current Principal Place of Business:**

800 JEFFREY ST  
#407  
BOCA STREET, FL 33487

**Current Mailing Address:**

800 JEFFREY ST  
#407  
BOCA STREET, FL 33487 US

**FEI Number:** 46-1267896

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHADER, ANDREW T  
800 JEFFERY ST  
UNIT #407  
BOCA RATON, FL 33487 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            PRESIDENT  
Name            SHADER, ANDREW T  
Address        800 JEFFREY ST UNIT #407  
City-State-Zip: BOCA RATON FL 33487

*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:** ANDREW SHADER

**PRESIDENT**

**01/30/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date