| No. C 159934 | | Due no later than Apr 30, 2006 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|---|---|--|--|---|----------------------------------|----------------|-------------------|-------------------------|
| Return to: | | Annual Report Form | | CORPORATE CREATIONS NETWORK | | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. CINERGY HEALTH, INC. DAVID DIMLICH 19495 BISCAYNE BLVD | | 5481 KENDALL STREET BOISE ID 83706 | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | SUITE 604 AVENTURA FL 33180 USA | | 3. <u>New</u> Registered Agent Signature:* | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | | |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code |
| PRESIDENT SECRETARY DIRECTOR | DANIEL TOUIZER DAVID DIMLICH DANIEL TOUIZER | | 19495 BISCAYNE BLVD. 19495 BISCAYNE BLVD. 19495 BISCAYNE BLVD. | SUITE 604 | AVENTURA AVENTURA AVENTURA | FL FL FL | USA USA USA | 33180 33180 33180 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| FLORIDA C 159934 | | Signature: David Dimlich | | | Date: 04/24/2006 | | | |
| | | Name (type or print): David Dimlich | | | Title: Secretary | | | |
| Processed 04/24/2006 | | * Electronically provided signatures are accepted as original signatures. | | | | | | |