

No. C 213316	Due no later than Apr 30, 2018 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. AMERICAS HEALTH CENTER INC. 2200 N FEDERAL HWY STE 214 BOCA RATON FL 33431 141 NW 20th Street Suite G6 Boca Raton, FL 33431		3. <u>New</u> Registered Agent Signature.																					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>C.E.O.</td> <td>Drew Cohen</td> <td>10179 Camelback Lane</td> <td>Boca Raton, FL</td> <td>USA</td> <td></td> <td>33498</td> </tr> <tr> <td>President</td> <td>Michael Rosen</td> <td>20981 Windemere Lane</td> <td>Boca Raton, FL</td> <td>USA</td> <td></td> <td>33428</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	C.E.O.	Drew Cohen	10179 Camelback Lane	Boca Raton, FL	USA		33498	President	Michael Rosen	20981 Windemere Lane	Boca Raton, FL	USA		33428
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