

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000110739

Entity Name: M.D. WELLNESS CENTERS, P.A.

FILED
Mar 22, 2006
Secretary of State

Current Principal Place of Business:

P.O. BOX 802534
NORTH MIAMI BEACH, FL 33280

Current Mailing Address:

P.O. BOX 802534
NORTH MIAMI BEACH, FL 33280

New Principal Place of Business:

19111 COLLINS AVE
2806
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

19111 COLLINS AVE
2806
SUNNY ISLES BEACH, FL 33160

FEI Number: 58-2332192 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVOICE, MARLA
19111 COLLINS AVE., #2806
NORTH MIAMI BEACH, FL 33160 US

Name and Address of New Registered Agent:

LAVOICE, MARLA
19111 COLLINS AVE., #2806
SUNNY ISLES BEACH, FL 33160 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: MARLA LAVOICE 03/22/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAVOICE, MARLA
Address: PO BOX 802534
City-St-Zip: NORTH MIAMI BEACH, FL 33280

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAVOICE, MARLA
Address: 19111 COLLINS AVE 2806
City-St-Zip: SUNNY ISLES BEACH, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MARLA LAVOICE P 03/22/2006

Electronic Signature of Signing Officer or Director Date