

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000005057

**FILED**  
**Apr 06, 2005**  
**Secretary of State**

**Entity Name:** FLEISCHMANN WELLNESS GROUP, INC.

**Current Principal Place of Business:**

1031 IVES DAIRY ROAD SUITE 228  
NORTH MIAMI BEACH, FL 33179

**New Principal Place of Business:**

12490 NE 7TH AVENUE  
SUITE 211  
NORTH MIAMI, FL 33161

**Current Mailing Address:**

1880 NE 206 TERRACE  
NORTH MIAMI BEACH, FL 33179

**New Mailing Address:**

**FEI Number:** 16-1649250      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FLEISCHMANN, SUZETTE B PRES.  
1880 NE 206 TERRACE  
NORTH MIAMI BEACH, FL 33179      US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPTS      ( ) Delete  
**Name:** FLEISCHMANN, SUZETTE B PRES.  
**Address:** 1880 NE 206 TERRACE  
**City-St-Zip:** NORTH MIAMI BEACH, FL 33179

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUZETTE B. FLEISCHMANN

PRES

04/06/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date