2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2012
Secretary of State

DOCUMENT# P05000107991

Entity Name: LAUDERDALE HEALTH & WELLNESS, INC.

Current Principal Place of Business:

915 MIDDLE RIVER DRIVE
SUITE 303
FT LAUDERDALE, FL 33304

New Principal Place of Business:

6400 N ANDREWS AVE
SUITE 360
FT LAUDERDALE, FL 33309

Current Mailing Address:

915 MIDDLE RIVER DRIVE
SUITE 303
FT LAUDERDALE, FL 33304

New Mailing Address:

6400 N ANDREWS AVE
SUITE 360
FT LAUDERDALE, FL 33309

FEI Number: 20-3301642 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THACKREY, JEFFREY DR.
915 MIDDLE RIVER DRIVE
SUITE 303
FT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

THACKREY, JEFFREY L DR.
6400 N ANDREWS AVE
SUITE 360
FT LAUDERDALE, FL 33309 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: JEFFREY L THACKREY 02/09/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: O
Name: THACKREY, JEFFREY DR.
Address: 6400 N ANDREWS AVE SUITE 360
City-St-Zip: FT LAUDERDALE, FL 33309

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: JEFFREY L THACKREY PRES 02/09/2012
Electronic Signature of Signing Officer or Director Date