

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S77281

FILED  
Feb 21, 2011  
Secretary of State

**Entity Name:** TOTAL HEALTH CORPORATION

**Current Principal Place of Business:**

1380 NE MIAMI GARDENS DR, SUITE 115  
SUITE 115  
N MIAMI BCH, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

1380 NE MIAMI GARDENS DR, SUITE 115  
SUITE 115  
N MIAMI BCH, FL 33179

**New Mailing Address:**

**FEI Number:** 65-0288332      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FRAYND, GERMAN  
1380 NE MIAMI GARDENS DR.  
SUITE 115  
N MIAMI BCH, 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: FRAYND, GERMAN  
Address: 1380 NE MIAMI GARDENS DR  
City-St-Zip: N MIAMI BCH, FL 33179

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: GERMAN FRAYND

DR

02/21/2011

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

\_\_\_\_\_ Date