2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000051705

City-St-Zip:

JACKSONVILLE, FL 32224

Entity Name: HEALTH TECHS THERAPEUTIC MASSAGE, INC.

FILED Jan 03, 2006 Secretary of State

Current F	Principal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
#10	N PABLO RD S				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	LIS ISLAND DI NVILLE, FL 32				
FEI Numbe	r: 59-3516678	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name an	d Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
12901 EL	NN, NANCI LIS ISLAND DI VVILLE, FL 32				
	e named entity te of Florida.	submits this statement for the	e purpose of changing its registered	office or registered agent, or both,	
SIGNATU	JRE:				
	Electro	nic Signature of Registered A	gent	Date	
Election Ca	ampaign Financir	ng Trust Fund Contribution ().			
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	BERGMANN, I) Delete NANCI SLAND DRIVE	Title: Name: Address:	() Change () Addition	

City-St-Zip:

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: NANCI BERGMANN PD 01/03/2006