2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2010
Secretary of State

DOCUMENT# N08000001623

Entity Name: THE EXCLUSIVE WELLNESS CENTER, INC.

Current Principal Place of Business:

4210 EMPIRE PLACE
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

4210 EMPIRE PLACE
TAMPA, FL 33610

New Mailing Address:

FEI Number: 26-1919328 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WRIGHT, ALISHIA
4210 EMPIRE PLACE
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

WRIGHT, ALISHIA S
4210 EMPIRE PLACE
TAMPA, FL 33610 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: ALISHIA S. WRIGHT 05/04/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: WRIGHT, ALISHIA S
Address: 4210 EMPIRE PLACE
City-St-Zip: TAMPA, FL 33610

Title: TD
Name: LEVISTON, RAY
Address: 7212 HAMMET ROAD
City-St-Zip: TAMPA, FL 33647

Title: SD
Name: ABDULLAH, DELLA
Address: 2121 BARCELONA WAY SOUTH
City-St-Zip: ST PETERBURG, FL 33712

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALISHIA S. WRIGHT PD 05/04/2010
Electronic Signature of Signing Officer or Director Date