

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000084670

FILED
Oct 15, 2011
Secretary of State

Entity Name: HIGHPOINT HEALING AND WELLNESS, INC.

Current Principal Place of Business:

2400 WEST CYPRESS CREEK ROAD
SUITE 101
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

3500 NORTH STATE ROAD 7
SUITE 207
LAUDERDALE LAKES, FL 33319

Current Mailing Address:

4706 NW 36TH STREET
#504
FORT LAUDERDALE, FL 33319

New Mailing Address:

FEI Number: 02-0788497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EXCEUS, VALENCIE
4706 NW 36TH STREET
#504
LAUDERDALE LAKES, FL 33319 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: VALENCIE EXCEUS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: EXCEUS, VALENCIE
Address: 4706 NW 36TH STREET, #504
City-St-Zip: LAUDERDALE LAKES, FL 33319

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: VALENCIE EXCEUS

P

10/15/2011

Electronic Signature of Signing Officer or Director

Date