2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2014
Secretary of State
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Entity Name: HIGHPOINT HEALING AND WELLNESS, INC.

Current Principal Place of Business:

3500 NORTH STATE ROAD 7
SUITE 440
LAUDERDALE LAKES, FL 33319

Current Mailing Address:

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

FEI Number: 02-0788497

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P
Name	EXCEUS, VALENCIE
Address	4706 NW 36TH STREET, #504
City-State-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 PRESIDENT 04/19/2014

Electronic Signature of Signing Officer/Director Detail — Date