2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 04, 2004
Secretary of State

DOCUMENT# L96000000909

Entity Name: HEALTHWEALTH INTERNATIONAL, LC

Current Principal Place of Business:

517 NW 103RD AVENUE
PLANTATION, FL 333241625 US

New Principal Place of Business:

517 NW 103 AVENUE
PLANTATION, FL 333241625 US

Current Mailing Address:

517 NW 103RD AVENUE
PLANTATION, FL 333241625 US

New Mailing Address:

517 NW 103 AVENUE
PLANTATION, FL 333241625 US

FEI Number: 65-0706371 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARD, DIANE E
517 NW 103 AVENUE
FT. LAUDERDALE, FL 333241625 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: WARD, DIANE E
Address: 517 NW 103RD AVENUE
City-St-Zip: PLANTATION, FL 333241625 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: WARD, DIANE E
Address: 517 NW 103 AVENUE
City-St-Zip: PLANTATION, FL 333241625 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DIANE E WARD MS. 03/04/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date