

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002147

Entity Name: BE HEALTHY, INC.

**FILED**  
**May 03, 2004**  
**Secretary of State****Current Principal Place of Business:**333 W. 41ST STREET  
SUITE 414  
MIAMI BEACH, FL 33140**New Principal Place of Business:****Current Mailing Address:**333 W. 41ST STREET  
SUITE 414  
MIAMI BEACH, FL 33140**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**GALIPO, JANET  
333 W. 41ST STREET  
SUITE 414  
MIAMI BEACH, FL 33140**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

**OFFICERS AND DIRECTORS:**Title: D ( ) Delete  
Name: GALIPO, JANET  
Address: 333 W. 41ST STREET  
City-St-Zip: MIAMI BEACH, FL 33140Title: D ( ) Delete  
Name: HOULAHAN, KATHLEEN  
Address: 50 ASHLAND STREET  
City-St-Zip: ARLINGTON, MA 02476Title: D ( ) Delete  
Name: KRONER, JONATHAN  
Address: 100 N. BISCAYNE BLVD., SUITE 3000  
City-St-Zip: MIAMI, FL 33132**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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 an address, with all other like empowered.

SIGNATURE: JANET GALIPO

PRES

05/03/2004

Electronic Signature of Signing Officer or Director

Date