2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 24, 2006 08:00 AN DOCUMENT # N03000002147 **Secretary of State** BE HEALTHY, INC. Principal Place of Business Mailing Address **333 W. 41ST STREET** 333 W. 41ST STREET SUITE 414 SUITE 414 MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140 04212006 No Chg-NP CR2E037 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-0156239 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GALIPO, JANET DO NOT WRITE 333 W. 41ST STREET **SUITE 414** IN THIS SPACE MIAMI BEACH, FL 33140 5. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remainting) 0000000531456 9. Election Campaign Financing \$5.00 May Be 05/06/06-80044-020 61.25 Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2008 10. OFFICERS AND DIRECTORS TITLE GALIPO, JANET NAME STREET ADDRESS 333 W. 418T STREET CITY-ST-ZIP MIAMI BEACH, FL 33140 TITLE HOULAHAN, KATHLEEN STREET ADDRESS 50 ASHLAND STREET City-ST-ZP ARLINGTON, MA 02476 KRONER, JONATHAN STREET ADDRESS 100 N. BISCAYNE BLVD., SUITE 3000 DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33132 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CRTY-ST-ZP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information inclicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED

Daytme Phone #