2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002262

FILED Apr 26, 2005 Secretary of State

Entity Name: SAFETY AND WELLNESS CONSULTANTS INC.

urrent P	Principal Place of Business:	New Principal Place of Business:
2499 GL	ADES RD.	2200 BOCA RATON BLVD
STE. 305E		SUITE 104
OCA RA	ATON, FL 33431	BOCA RATON, FL 33431
urrent N	failing Address:	New Mailing Address:
	ADES RD.	2200 BOCA RATON BLVD
STE. 305E	3 ATON, FL 33431	SUITE 104 BOCA RATON, FL 33431
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El Number	r: 81-0604631 FEI Number Applied For	() FEI Number Not Applicable () Certificate of Status Desired ()
lame and	d Address of Current Registered Age	ent: Name and Address of New Registered Agent:
	MIZE DOIAN	
0922 RA 30CA RA	NGE, BRIAN VEL COURT NTON, FL 33498 US	
0922 RA 3OCA RA The above	VELCOURT TON, FL 33498 US	or the purpose of changing its registered office or registered agent, or both,
0922 RA 3OCA RA The above	NEL COURT TON, FL 33498 US e named entity submits this statement for te of Florida. IRE:	
0922 RA 3OCA RA he above the Stat	NEL COURT TON, FL 33498 US e named entity submits this statement fo te of Florida.	
0922 RA BOCA RA The above the Stat	NEL COURT TON, FL 33498 US e named entity submits this statement for te of Florida. IRE:	red Agent Date
0922 RA BOCA RA The above the Stat	NEL COURT NTON, FL 33498 US e named entity submits this statement for te of Florida. IRE: Electronic Signature of Register	red Agent Date
0922 RA' BOCA RA The above the State BIGNATU DFFICER title: lame:	NEL COURT NTON, FL 33498 US e named entity submits this statement for the of Florida. RE: Electronic Signature of Register S AND DIRECTORS: D () Delete L'ESTRANGE, BRIAN	red Agent ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Title: () Change () Addition Name:
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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: BRIAN L'ESTRANGE, DIRECTOR D 04/26/2005