

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jan 29, 2011**  
**Secretary of State**

DOCUMENT# N10000007057

**Entity Name:** PREMIER WELLNESS CONSULTANTS, INC.**Current Principal Place of Business:**1560 SOUTH FRENCH AVE.  
SANFORD, FL 32771**New Principal Place of Business:****Current Mailing Address:**1560 SOUTH FRENCH AVE.  
SANFORD, FL 32771**New Mailing Address:****FEI Number:** 27-2861992**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**KUBEK, ELZBIETA  
2630 CAYMAN WAY  
WINTER PARK, FL 32792 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KUBEK, ELZBIETA S  
Address: 2630 CAYMAN WAY  
City-St-Zip: WINTER PARK, FL 32792

Title: P  
Name: ENYEDY, LORENA  
Address: 1560 S. FRENCH AVE.  
City-St-Zip: SANFORD, FL 32771

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LORENA ENYEDY

P

01/29/2011

Electronic Signature of Signing Officer or Director

Date