2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000096734

Entity Name: SHEN MEN HEALING ARTS, INC.

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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231-B COMMERCIAL BLVD. 3020 E. COMMERCIAL BLVD

FORT LAUDERDALE, FL 33308 US FORT LAUDERDALE, FL 33308 US

Current Mailing Address: New Mailing Address:

231-B COMMERCIAL BLVD. 3020 E. COMMERCIAL BLVD.

FORT LAUDERDALE, FL 33308 US FORT LAUDERDALE, FL 33308 US

FEI Number: 65-1048898 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MITCHELL, SUSAN
4448 BOUGAINVILLA DR. #5

MITCHELL, SUSAN
311-R N.E. 16TH AVE.

FORT LAUDERDALE, FL 33308 US FORT LAUDERDALE, FL 33301 US

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: 04/24/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC () Delete Title: PC (X) Change () Addition

Name: MITCHELL, SUSAN Name: MITCHELL, SUSAN Address: 4448 BOUGAINVILLA DR #5 Address: 311-R N.E. 16TH AVE.

City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP () Delete Title: VP (X) Change () Addition

Name:MITCHELL, JEFFREYName:MITCHELL, JEFFREYAddress:4448 BOUGAINVILLE DR. #5Address:311-R N.E. NE 16TH AVE.City-St-Zip:FORT LAUDERDALE, FL 33308City-St-Zip:FORT LAUDERDALE, FL 33301

Title: ST () Delete Title: () Change () Addition

 Name:
 OSWALT, MAXINE
 Name:

 Address:
 242 NEPTUNE AVE. #3
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33308
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN MITCHELL PC 04/24/2008