

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000096734

FILED
Jan 16, 2009
Secretary of State

Entity Name: SHEN MEN HEALING ARTS, INC.

Current Principal Place of Business:

3020 E. COMMERCIAL BLVD.
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

3020 E. COMMERCIAL BLVD.
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

MITCHELL, SUSAN
311-R N.E. 16TH AVE.
FORT LAUDERDALE, FL 33301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: MITCHELL, SUSAN
Address: 311-R N.E. 16TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP () Delete
Name: MITCHELL, JEFFREY
Address: 311-R N.E. NE 16TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: ST () Delete
Name: OSWALT, MAXINE
Address: 242 NEPTUNE AVE. #3
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: STEELE, WILLIAM K
Address: 3017 N. OAKLAND FOREST DR. #208
City-St-Zip: FORT LAUDERDALE, FL 33309

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: WILLIAM K. STEELE

ST

01/16/2009

Electronic Signature of Signing Officer or Director

_____ Date