## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000002901

City-St-Zip:

TAMPA, FL 33611

Entity Name: TOTAL HEALTH & WELLNESS CENTERS II, INC.

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
936-D SOI TAMPA, F	UTH HOWARI L 33606	O AVENUE			
Current Mailing Address:			New Mailing Address:		
936-D SOI TAMPA, F	UTH HOWARI L 33606	O AVENUE			
FEI Number	: 59-3688858	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
343 ALME CORAL G.	& UTRERA, P. RIA AVENUE ABLES, FL 33	134 US			
	e named entity: e of Florida.	submits this statement for the	purpose of changing its registered	l office or registered agent, or both,	
SIGNATUI	RE:				
	Electror	nic Signature of Registered Ac	gent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VPS ( CAMPOS, RAY 605 DANUBE A TAMPA, FL 33	VE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	P ( ) ARVANITIS, DO 5801 BAYSHO		Title: Name: Address:	()Change ()Addition	

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: DOUG ARVANITIS P 04/22/2008