

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000004294

**FILED**  
**Feb 11, 2012**  
**Secretary of State**

**Entity Name:** ELECTROMAGNETIC HEALTH RESEARCH INC.

**Current Principal Place of Business:**

8501 S.W. 86TH COURT  
MIAMI, FL 33143 US

**New Principal Place of Business:**

**Current Mailing Address:**

8501 S.W. 86TH COURT  
MIAMI, FL 33143 US

**New Mailing Address:**

**FEI Number:** 65-1101498

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YAMUNI, LUZ STELLA  
8501 S.W. 86TH COURT  
MIAMI, FL 33143 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: PSTD  
Name: YAMUNI, LUZ STELLA  
Address: 8501 S.W. 86TH COURT  
City-St-Zip: MIAMI, FL 33143 US

Title: VP  
Name: YAMUNI, SEAN  
Address: 8501 SW 86TH COURT  
City-St-Zip: MIAMI, FL 33143 US

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

SIGNATURE: LUZ STELLA YAMUNI

PRES

02/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date