2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034653

Entity Name: JOLANDA'S HEALING TOUCH, INC.

FILED Mar 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 820 2ND STREET LAKE PARK, FL 33403 **Current Mailing Address: New Mailing Address:** 820 2ND STREET LAKE PARK, FL 33403 FEI Number: 65-1095940 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: BRADY, JOLANDA BRADY, JOLANDA 820 2ND STREET 820 2ND STREET WEST PALM BEACH, FL 33403 US LAKE PARK, FL 33403 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: 03/28/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSTD () Delete Title: () Change () Addition BRADY, JOLANDA Name: Name: 820 2ND STREET Address: Address: City-St-Zip: LAKE PARK, FL 33403 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOLANDA BRADY PSTD 03/28/2005