## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000040746

Entity Name: HEALTH GENESIS CORPORATION

FILED Apr 20, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 9429 HARDING AVENUE 12 SURFSIDE, FL 33154 **New Mailing Address: Current Mailing Address:** P.O. BOX 546703 SURFSIDE, FL 33154 FEI Number: 58-2434277 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: NOE, SUSAN I 1440 79TH ST. CAUSEWAY, STE. 321 NORTH BAY VILLAGE, FL 33141 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition ARJONA, DAVID E BOZDOGAN, DAVID Name: Name: P.O. BOX 546703 P.O. BOX 546703 Address: Address: City-St-Zip: SURFSIDE, FL 33154 City-St-Zip: SURFSIDE, FL 33154

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: DAVID BOZDOGAN D 04/20/2005