

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000120023

FILED
Apr 29, 2008
Secretary of State

Entity Name: FLEUR WELLNESS CENTER & SPA, P.A.

Current Principal Place of Business:

3956 TOWN CENTER BLVD.
#524
ORLANDO, FL 32837

New Principal Place of Business:

3956 TOWN CENTER BLVD.
PMB 524
ORLANDO, FL 32837

Current Mailing Address:

3956 TOWN CENTER BLVD.
#524
ORLANDO, FL 32837

New Mailing Address:

3956 TOWN CENTER BLVD.
PMB 524
ORLANDO, FL 32837

FEI Number: 02-0533752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NGUYEN, CHAU A
3956 TOWN CENTER BOULEVARD
#524
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

FWCS
3956 TOWN CENTER BOULEVARD
PMB 524
ORLANDO, FL 32837 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: FWCS

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NGUYEN, SERENA
Address: 3956 TOWN CENTER BOULEVARD, #524
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NGUYEN, RENA
Address: 3956 TOWN CENTER BOULEVARD, PMB 524
City-St-Zip: ORLANDO, FL 32837

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: RENA NGUYEN

PD

04/29/2008

Electronic Signature of Signing Officer or Director

Date