

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000074037

FILED  
Mar 31, 2004  
Secretary of State

Entity Name: PHOENIX HOLISTIC CENTER CORPORATION

## Current Principal Place of Business:

1290 WESTON ROAD, SUITE 306  
WESTON, FL 33326

## New Principal Place of Business:

19286 SW 25TH COURT  
MIRAMAR, FL 33329 US

## Current Mailing Address:

1290 WESTON ROAD, SUITE 306  
WESTON, FL 33326

## New Mailing Address:

19286 SW 25TH COURT  
MIRAMAR, FL 33329 US

FEI Number: 81-0575801

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHMACHTENBERG, LEE C  
1533 SUNSET DRIVE  
SUITE 201  
CORAL GABLES, FL 33143 US

## Name and Address of New Registered Agent:

RUIZ, CLARA M  
19286 SW 25TH COURT  
MIRAMAR, FL 33329 FL

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: CLARA M. RUIZ

03/31/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LIENDO, GISELA  
Address: 1290 WESTON ROAD, SUITE 306  
City-St-Zip: WESTON, FL 33326

Title: V ( ) Delete  
Name: RUIZ, CLARA  
Address: 1290 WESTON ROAD, SUITE 306  
City-St-Zip: WESTON, FL 33326

Title: S ( ) Delete  
Name: LIENDO, MARIELBA  
Address: 1290 WESTON ROAD, SUITE 306  
City-St-Zip: WESTON, FL 33326

Title: T ( ) Delete  
Name: SOSA, LUIS  
Address: 1290 WESTON ROAD, SUITE 306  
City-St-Zip: WESTON, FL 33326

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: CLARA M. RUIZ

V

03/31/2004

Electronic Signature of Signing Officer or Director

Date