## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000074037

Entity Name: PHOENIX HOLISTIC CENTER CORPORATION

FILED Apr 27, 2005 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business: 19286 SW 25TH COURT 19286 SW 25TH COURT MIRAMAR, FL 33329 MIRAMAR, FL 33029 **Current Mailing Address: New Mailing Address:** 19286 SW 25TH COURT 19286 SW 25TH COURT MIRAMAR, FL 33329 US MIRAMAR, FL 33029 US FEI Number: 81-0575801 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: RUIZ, CLARA M RUIZ, CLARA M 19286 SW 25TH COURT 19286 SW 25TH COURT MIRAMAR, FL 33329 MIRAMAR, FL 33029 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: 04/27/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Change ( ) Addition ( ) Delete Title: LIENDO, GISELA LIENDO, GISELA Name: Name: 1290 WESTON ROAD, SUITE 306 19148 SW 26 STREET Address: Address: MIRAMAR, FL 33029 City-St-Zip: WESTON, FL 33326 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition Name: RUIZ. CLARA Name: RUIZ CLARA 1290 WESTON ROAD, SUITE 306 2603 SW 188TH AV Address: Address: MIRAMAR, FL 33029 WESTON, FL 33326 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition LIENDO, MARIELBA Name: Name: 1290 WESTON ROAD, SUITE 306 Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SOSA, LUIS SOSA, LUIS Name: Name: Address: 1290 WESTON ROAD, SUITE 306 Address: 19286 SW 25TH COURT City-St-Zip: WESTON, FL 33326 City-St-Zip: MIRAMAR, FL 33029

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 RUIZ VP 04/27/2005