

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096218

Entity Name: SLEEP WELL MED, INC.

FILED
Jan 05, 2012
Secretary of State

Current Principal Place of Business:

810 WILDWOOD STREET
STE 2
DAYTONA BEACH, FL 32117 US

New Principal Place of Business:

Current Mailing Address:

810 WILDWOOD STREET
STE 2
DAYTONA BEACH, FL 32117 US

New Mailing Address:

FEI Number: 41-2064090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, BRIAN R ESQ
57 WEST GRANADA BLVD
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PVST
Name: WAHBA, WAHBA W
Address: 810 WILDWOOD STREET
City-St-Zip: DAYTONA BEACH, FL 32117

Title: D
Name: WAHBA, WAHBA W
Address: 810 WILDWOOD STREET
City-St-Zip: DAYTONA BEACH, FL 32117

I hereby 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 all other like empowered.

SIGNATURE: WAHBA W WAHBA

PVST

01/05/2012

Electronic Signature of Signing Officer or Director

Date