

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000123185

FILED
Jan 17, 2004
Secretary of State

Entity Name: ZANNIS WELLNESS CENTER, INC.

Current Principal Place of Business:

1500 EAST HILLSBORO BLVD.
SUITE 210
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

1500 NORTH UNIVERSITY DRIVE
SUITE 112
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

1500 EAST HILLSBORO BLVD.
SUITE 210
DEERFIELD BEACH, FL 33441

New Mailing Address:

1500 NORTH UNIVERSITY DRIVE
SUITE 112
CORAL SPRINGS, FL 33071 US

FEI Number: 22-3883851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

BRIAN LYNN, C.P.A., P.A.
TWO SOUTH UNIVERSITY DRIVE
SUITE 215
PLANTATION, FL 33324 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: BRIAN LYNN

01/17/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ZANNIS, JASON M D.O.
Address: 1500 EAST HILLSBORO BLVD. #210
City-St-Zip: DEERFIELD BEACH, FL 33441

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ZANNIS, JASON M D.O.
Address: 1500 NORTH UNIVERSITY DRIVE #112
City-St-Zip: CORAL SPRINGS, FL 33071

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: JASON M ZANNIS

PSTD

01/17/2004

Electronic Signature of Signing Officer or Director

Date