

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126781

FILED
Jul 08, 2008
Secretary of State

Entity Name: ACUPUNCTURE & HERBAL THERAPIES, INC.

Current Principal Place of Business:

901 CENTRAL AVE
ST PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

901 CENTRAL AVE
ST PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 04-3730413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDE, ROBERT G
1033 BAY STREET NE
APT 2
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

LINDE, ROBERT G
901 CENTRAL AVE
ST PETERSBURG, FL 33705 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: ROBERT G LINDE

07/08/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D, P () Delete
Name: LINDE, ROBERT G AP
Address: 1033 BAY STREET APT 2
City-St-Zip: ST PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: LINDE, ROBERT G AP
Address: 901 CENTRAL AVE
City-St-Zip: ST PETERSBURG, FL 33705

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: ROBERT G LINDE

PRES

07/08/2008

Electronic Signature of Signing Officer or Director

Date