## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P03000027249

FILED Apr 24, 2006 Secretary of State

Entity Na	ame: ACUPUI	NCTURE & ORIENTAL MEDIC	INE NATIONAL COA	LITION, COR	RP.		
Current I	Principal Plac	e of Business:	New Princ	New Principal Place of Business:			
4000 TO\ MIAMI, FL	WERSIDE TER 33138	RR. #1207					
Current Mailing Address:			New Maili	New Mailing Address:			
PO BOX : LIGHTHC	5631 DUSE POINT, F	FL 330745631					
FEI Numbe	r: 83-0349585	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired (	( )	
Name an	d Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
325 SOU	RDT, PAUL J TH JEFFERSE Y HILLS, FL 34						
	e named entity te of Florida.	submits this statement for the	purpose of changing	ts registered	office or registered agent, or	both,	
SIGNATL	JRE:						
	Electro	nic Signature of Registered Ag	ent		Date		
OFFICER	RS AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address:	SONTAG, DA	) Delete /ID N SIDE TERR. #1207	Title: Name: Address:	SONTAG, DA	X) Change ()Addition VID N RSIDE TERR. #1207		

City-St-Zip: MIAMI, FL 33138 City-St-Zip: MIAMI, FL 33138 DVS () Delete Title: (X) Change ( ) Addition

REINHARDT, PAUL J REINHARDT, PAUL J Name: Name:

Address: 325 SOUTH JEFFERSON STREET Address: 325 SOUTH JEFFERSON STREET BEVERLY HILLS, FL 34465 BEVERLY HILLS, FL 34465 City-St-Zip: City-St-Zip:

Title: Title: ( ) Change (X) Addition ( ) Delete

Name: Name: FREIBERG, RICHARD A Address: Address: P. O. BOX 5631

City-St-Zip: City-St-Zip: LIGHTHOUSE POINT, FL 33074 56

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID N. SONTAG D 04/24/2006