

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028450

FILED
Jun 01, 2004
Secretary of State

Entity Name: NORTHLAKE WELLNESS CENTER INC.

Current Principal Place of Business:

3832 NORTHLAKE BLVD
PALM BCH GARDENS, FL 33410

New Principal Place of Business:

3832 NORTHLAKE BLVD
PALM BCH GARDENS, FL 33403 US

Current Mailing Address:

3832 NORTHLAKE BLVD
PALM BCH GARDENS, FL 33410

New Mailing Address:

1216 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH, FL 33411 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUARTELL, BETH
3832 NORTHLAKE BLVD
PALM BCH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

SINGER, MICHAEL S ESQ
3801 PGA BLVD.
SUITE 604
PALM BCH GARDENS, FL 33410 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: MICHAEL S. SINGER

06/01/2004

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: DP () Delete
Name: QUARTELL, GETH
Address: 25 DUNBUR RD
City-St-Zip: PALM BCH GARDENS, FL 33418

Title: DST (X) Delete
Name: ARKIN, DONNA
Address: 1278 GEMBROOK CT
City-St-Zip: ROYAL PALM BCH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DAVIS, MICHAEL E
Address: 1216 ROYAL PALM BEACH BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL E. DAVIS

P/D

06/01/2004

Electronic Signature of Signing Officer or Director

Date