2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000033078

Entity Name: PEDIATRIC NUTRITION & WELLNESS CENTER, INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

255 S.E. 14TH STREET 10200 STATE ROAD 84 # 1C SUITE 101

1C SUITE 101 FT. LAUDERDALE,, FL 33316 US DAVIE, FL 33324 US

Current Mailing Address: New Mailing Address:

255 S.E. 14TH STREET 10200 STATE ROAD 84 # 1C SUITE 101

FT. LAUDERDALE,, FL 33316 US DAVIE, FL 33324 US

FEI Number: 42-1586893 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EDELSTEIN, ANDREW R
255 S.E. 14TH STREET
41-C
FT. LAUDERDALE,, FL 33316 US
EDELSTEIN, ANDREW R
10200 STATE ROAD 84
SUITE 101
DAVIE, 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: 04/27/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDELSTEIN, ANDREW A

Address: 255 S.E. 14TH ST. #1-C City-St-Zip: FT. LAUDERDALE, FL 33316 US

Title: S () Delete
Name: EDELSTEIN, ELIZABETH A
Address: 255 S.E. 14TH ST #1-C

City-St-Zip: FT. LAUDERDALE, FL 33316 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition

Name: EDELSTEIN, ANDREW R

Address: 10200 STATE ROAD 84, SUITE 101

City-St-Zip: DAVIE, FL 33324 US

Title: S (X) Change () Addition

Name: EDELSTEIN, ELIZABETH A

Address: 10200 STATE ROAD 84, SUITE 101

City-St-Zip: DAVIE, FL 33324 US

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: ANDREW EDELSTEIN P 04/27/2005