## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000036006

FILED May 01, 2011 Secretary of State

Entity Name: ALTERNATIVE MEASURES HOLISTIC MEDICINE, INC.

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

1485 NE 152 ST. 7601 E. TREASURE DR.

NORTH MIAMI BEACH, FL 33162 US 508

NORTH BAY VILLAGE, FL 33141 US

Current Mailing Address: New Mailing Address:

1485 NE 152 ST. 7601 E. TREASURE DR.

NORTH MIAMI BEACH, FL 33162 US 508

NORTH BAY VILLAGE, FL 33141 US

FEI Number: 90-0066112 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BELTON, SANDY A
1485 N.E. 152ND ST.
BELTON, SANDY A
7601 E. TEASURE DR.

NORTH MIAMI BEACH, FL 33162 US 508 NORTH BAY VILLAGE, FL 33141 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: 05/01/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: DF

Name: BELTON, SANDY A JR

Address: 7601 E. TREASURE DR. APT. 508 City-St-Zip: NORTH BAY VILLAGE, FL 33141

I hereby 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 all other like empowered.

SIGNATURE: SANDY A BELTON JR DR 05/01/2011