

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000101598

FILED
Jan 26, 2005
Secretary of State

Entity Name: CHAMPION WELLNESS, INC.

Current Principal Place of Business:

7345 BURGESS DRIVE
LAKE WORTH, FL 33467

New Principal Place of Business:

8991 NW 12TH PLACE
PLANTATION, FL 33322

Current Mailing Address:

7345 BURGESS DRIVE
LAKE WORTH, FL 33467

New Mailing Address:

8991 NW 12TH PLACE
PLANTATION, FL 33322

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

Name and Address of Current Registered Agent:

KOHN, SHAYNE
7345 BURGESS DRIVE
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

KOHN, SHAYNE
8991 NW 12TH PLACE
PLANTATION, FL 33322 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: SHAYNE KOHN

01/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KOHN, SHAYNE
Address: 7345 BURGESS DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: VP () Delete
Name: GESCH, PATRICIA
Address: 1425 ARTHUR ST. APT. #109
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KOHN, SHAYNE
Address: 8991 NW 12TH PLACE
City-St-Zip: PLANTATION, FL 33322

Title: VP (X) Change () Addition
Name: GESCH MUNOZ, PATRICIA
Address: 4980 SW 167TH AVE
City-St-Zip: SOUTHWEST RANCHES, FL 33331

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: PATRICIA GESCH MUNOZ

VP

01/26/2005

Electronic Signature of Signing Officer or Director

Date