2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2011
Secretary of State

DOCUMENT# P03000133504

Entity Name: POMPANO BEACH HEALING CENTER, INC.

Current Principal Place of Business:

901 E SAMPLE RD STE J
POMPANO BEACH, FL 33064

New Principal Place of Business:

901 E SAMPLE RD STE I
POMPANO BEACH, FL 33064

Current Mailing Address:

901 E SAMPLE RD STE J
POMPANO BEACH, FL 33064

New Mailing Address:

901 E SAMPLE RD STE I
POMPANO BEACH, FL 33064

FEI Number: 20-0377040 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PROCHETTE, MANOUCHKA
901 E SAMPLE RD STE J
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

PROCHETTE, MANOUCHKA
901 E SAMPLE RD STE I
POMPANO BEACH, FL 33064 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: _____ 04/21/2011
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: PROCHETTE, MANOUCHKA
Address: 901 E SAMPLE RD STE I
City-St-Zip: POMPANO BEACH, FL 33064

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: MANOUCHKA PROCHETTE P 04/21/2011
Electronic Signature of Signing Officer or Director — Date