

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141170

Entity Name: HEALTH & LIFE, INC

FILED
Apr 29, 2004
Secretary of State

Current Principal Place of Business:

1027 SW 76TH AVE
MIAMI, FL 33144 US

New Principal Place of Business:

5085 NW 7TH ST NO. 1116
MIAMI, FL 33126 US

Current Mailing Address:

1027 SW 76TH AVE
MIAMI, FL 33144 US

New Mailing Address:

5085 NW 7TH ST NO. 1116
MIAMI, FL 33126 US

FEI Number: 20-0441769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAGNESSES, ALEXIS
1027 SW 76 AVE
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

DAGNESSES, ALEXIS
5085 NW 7TH ST NO. 1116
MIAMI, FL 33126 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:

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAGNESSES, ALEXIS
Address: 1027 SW 76 AVE
City-St-Zip: MIAMI, FL 33144 US

Title: VP () Delete
Name: GONZALEZ, GIOVANI
Address: 5085 NW 7TH ST APT. 1116
City-St-Zip: MIAMI, FL 33126 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DAGNESSES, ALEXIS
Address: 5085 NW 7TH ST NO. 1116
City-St-Zip: MIAMI, FL 33126 US

Title: VP (X) Change () Addition
Name: GONZALEZ, GIOVANI
Address: 1027 SW 76 AVE
City-St-Zip: MIAMI, FL 33144 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: ALEXIS DAGNESSES

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date