

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141170

Entity Name: HEALTH & LIFE, INC

FILED  
Apr 19, 2005  
Secretary of State

## Current Principal Place of Business:

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

## Current Mailing Address:

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

## New Principal Place of Business:

4811 NW 79 AVE  
SUITE 3  
MIAMI, FL 33166 US

## New Mailing Address:

17741 SW 146 CT  
MIAMI, FL 33177 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  
5085 NW 7TH ST NO. 1116  
MIAMI, FL 33126 US

## Name and Address of New Registered Agent:

DAGNESSES, ALEXIS  
17741 SW 146 CT  
MIAMI, FL 33177 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:

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

Title: VP (X) Delete  
Name: GONZALEZ, GIOVANI  
Address: 1027 SW 76 AVE  
City-St-Zip: MIAMI, FL 33144 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

04/19/2005

Electronic Signature of Signing Officer or Director

Date