2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000003129

Entity Name: EXECUTIVE HEALTH & WEALTH INSTITUTE, INC.

FILED Mar 25, 2008 Secretary of State

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

9999 NE 2ND AVENUE SUITE 213 8101 BISCAYNE BOULEVARD MIAMI SHORES, FL 33138

516

MIAMI, FL 33138

Current Mailing Address: New Mailing Address:

680 GRAND CONCOURSE MIAMI SHORES, FL 33138

FEI Number: 80-0091212 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LUPISELL, DOUGLAS R CPA CORA, GABRIELA 680 GRAND CONCOURSE 6901 SW 6TH STREET

PEMBROKE PINES, FL 33023 US US MIAMI SHORES, FL 33138

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: GABRIELA CORA 03/25/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

CORA-LOCATELLI, GABRIELA Name: Name: CORA, GABRIELA 680 GRAND CONCOURSE 680 GRAND CONCOURSE Address: Address: City-St-Zip: MIAMI SHORES, FL 33138 City-St-Zip: MIAMI SHORES, FL 33138

() Delete Title: Title: () Change () Addition

Name: LOCATELLI, EDUARDO R Name: 680 GRAND CONCOURSE Address: Address: MIAMI SHORES, FL 33138 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change (X) Addition

Name: CORA, GABRIELA Name: 680 GRAND CONCOURSE Address: Address: City-St-Zip: City-St-Zip: MIAMI SHORES, FL 33138

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GABRIELA CORA CEO 03/25/2008