

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010089

Entity Name: INNOVATIVE WELLNESS, INC.

FILED
Apr 26, 2011
Secretary of State

Current Principal Place of Business:

9220 BONITA SPRINGS RD., STE 219
BONITA SPRINGS, FL 34135

New Principal Place of Business:

15722 MUIRFIELD DR.
ODESSA, FL 33556

Current Mailing Address:

9220 BONITA SPRINGS RD., STE 219
BONITA SPRINGS, FL 34135

New Mailing Address:

15722 MUIRFIELD DR.
ODESSA, FL 33556

FEI Number: 80-0099084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRY, KIMBERLY L
7131 HAMILTON PARK BLVD.
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SARRA, DIANE R
Address: 15722 MUIRFIELD DRIVE
City-St-Zip: ODESSA, FL 33556

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: DIANE R SARRA

P

04/26/2011

Electronic Signature of Signing Officer or Director

Date