

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000110529

FILED
Feb 01, 2007
Secretary of State

Entity Name: I-WELLNESS INTERNATIONAL INC.

Current Principal Place of Business:

1660 GULF BLVD
SUITE 1104
CLEARWATER, FL 33767

New Principal Place of Business:

15748 BERE DRIVE
ODESSA, FL 33556

Current Mailing Address:

1660 GULF BLVD
SUITE 1104
CLEARWATER, FL 33767

New Mailing Address:

15748 BERE DRIVE
ODESSA, FL 33556

FEI Number: 20-1431201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROHRET, KARIN
12651 WALSINGHAM RD
SUITE A/ B
LARGO, FL 33774 US

Name and Address of New Registered Agent:

ROHRET & ASSOCIATES INC
1301 SEMINOLE BLVD
C-128
LARGO, FL 33770 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: KARIN ROHRET

02/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHALOW, PETER
Address: 1660 GULF BLVD SUITE 1104
City-St-Zip: CLEARWATER, FL 33767

Title: VPS () Delete
Name: JIMINEZ-LOSADA, OLY
Address: 1660 GULF BLVD SUITE 1104
City-St-Zip: CLEARWATER, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHALOW, PETER
Address: 15748 BERE DRIVE
City-St-Zip: ODESSA, FL 33556

Title: VPS (X) Change () Addition
Name: JIMINEZ-LOSADA, OLY
Address: 15748 BERE DRIVE
City-St-Zip: ODESSA, FL 33556

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER SCHALLOW

D

02/01/2007

Electronic Signature of Signing Officer or Director

Date