2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123112

Entity Name: ABSOLUTE HEALTH INT'L, INC.

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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916 JEFFERY STREET 100 SOUTH POINT DRIVE

BOCA RATON, FL 33487 US #2704

MIAMI BEACH, FL 33139 US

Current Mailing Address: New Mailing Address:

916 JEFFERY STREET 100 SOUTH POINT DRIVE

BOCA RATON, FL 33487 US #2704

MIAMI BEACH, FL 33139 US

FEI Number: 20-1618566 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:

CRITCH, ADAM G
916 JEFFERY STREET
CRITCH, ADAM G
100 SOUTH POINT DRIVE

BOCA RATON, FL 33487 US #2704

MIAMI BEACH, FL 33139 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: ADAM G. CRITCH 04/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 Name:
 CRITCH, ADAM G MGR

 Address:
 Address:
 100 SOUTH POINT DRIVE #2704

 City-St-Zip:
 City-St-Zip:
 MIAMI BEACH, FL 33139

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: ADAM G. CRITCH MGR 04/20/2005