2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2011
Secretary of State

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Entity Name: EMPOWER HEALTH & FITNESS SYSTEMS INC

Current Principal Place of Business:

10011 SW 145 PLACE
MIAMI, FL 33186

New Principal Place of Business:

12901 S.W. 132 AVE
MIAMI, FL 33186

Current Mailing Address:

10011 SW 145 PLACE
MIAMI, FL 33186

New Mailing Address:

12901 S.W. 132 AVE
MIAMI, FL 33186

FEI Number: 33-1108645 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTINEZ, DANIEL
10011 SW 145 PLACE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

SHENKMAN, HOWARD
12901 S.W. 132 AVE
MIAMI, FL 33186 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: HOWARD SHENKMAN 03/24/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: MARTINEZ-HIXSON, DANIEL
Address: 10011 SW 145 PLACE
City-St-Zip: MIAMI, FL 33186

Title: COO
Name: WHITING, DANIELLE
Address: 10333 S.W. 120 STREET
City-St-Zip: MIAMI, FL 33176

Title: CFO
Name: SHENKMAN, HOWARD
Address: 8401 S.W. 107 AVE #203E
City-St-Zip: MIAMI, FL 33173

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: HOWARD SHENKMAN CFO 03/24/2011
Electronic Signature of Signing Officer or Director Date