

2010 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 01, 2010
Secretary of State

Entity Name: CENTER FOR HOLISTIC HEALTH CARE, INC.

Current Principal Place of Business:

16101 N.E. 11TH COURT
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

909 N MIAMI BEACH BLVD
SUITE # 403
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

16101 N.E. 11TH COURT
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

909 N MIAMI BEACH BLVD
SUITE # 403
NORTH MIAMI BEACH, FL 33162

FEI Number: 20-2471245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOGAN, SERGEI MR.
16101 N.E. 11TH COURT
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

KOGAN, SERGEI MR.
909 N MIAMI BEACH BLVD
SUITE # 403
NORTH MIAMI BEACH, FL 33162 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:

04/01/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: KOGAN, SERGEI MR.
Address: 334 S.E. 3RD PLACE
City-St-Zip: DANIA, FL 33004

Title: VP
Name: KOGAN, NATALIA DR.
Address: 333 S.E. 6TH STREET
City-St-Zip: DANIA, FL 33004

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: SERGEI KOGAN

P

04/01/2010

Electronic Signature of Signing Officer or Director

Date