

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000092642

Entity Name: HEALTHECH MARKETING, INC

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

2431 NW 105 TERRACE  
CORAL SPRINGS, FL 33065

## New Principal Place of Business:

3558 CORAL SPRINGS DR  
CORAL SPRINGS, FL 33065

## Current Mailing Address:

2431 NW 105 TERRACE  
CORAL SPRINGS, FL 33065

## New Mailing Address:

3558 CORAL SPRINGS DR  
CORAL SPRINGS, FL 33065

FEI Number: 20-3112275

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CID, RAUL B  
2431 NW 105 TERRACE  
CORAL SPRINGS, FL 33065 US

## Name and Address of New Registered Agent:

CID, RAUL B  
3558 CORAL SPRINGS DR  
CORAL SPRINGS, FL 33065 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: RAUL B CID

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: MANNS, FRANCES M  
Address: 2431 NW 105 TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: P ( ) Delete  
Name: CID, RAUL H  
Address: 2431 NW 105 TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33065

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V/T (X) Change ( ) Addition  
Name: MANNS, FRANCES M  
Address: 3558 CORAL SPRINGS DR  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: P/S (X) Change ( ) Addition  
Name: CID, RAUL H  
Address: 3558 CORAL SPRINGS DR  
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify 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: FRANCES MANNS

V/T

04/29/2009

Electronic Signature of Signing Officer or Director

Date