

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099970

Entity Name: REAL HEALTH, INC.

FILED
Jan 05, 2006
Secretary of State

Current Principal Place of Business:

152 115TH AVENUE N
ST. PETERSBURG, FL 33716 US

New Principal Place of Business:

3015 7TH STREET N
ST. PETERSBURG, FL 33704 US

Current Mailing Address:

152 115TH AVENUE N
ST. PETERSBURG, FL 33716 US

New Mailing Address:

FEI Number: 20-3198054 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HABGOOD, NEIL
152 115TH AVE. N
ST. PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

HABGOOD, NEIL MR.
152 115TH AVE. N
ST. PETERSBURG, FL 33716 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: NEIL HABGOOD

01/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HABGOOD, NEIL
Address: 152 115TH AVE. N
City-St-Zip: ST. PETERSBURG, FL 33716 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: HABGOOD, NEIL
Address: 152 115TH AVE. N
City-St-Zip: ST. PETERSBURG, FL 33716 US

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: NEIL HABGOOD

MR.

01/05/2006

Electronic Signature of Signing Officer or Director

Date