2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129084

Entity Name: PROACTIVE HEALTH, INC.

FILED Jul 18, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1910 NE 5 FORT LAU	9TH CT JDERDALE, FI	_ 33308			
Current Mailing Address:			New Mailing Address:		
1910 NE 5 FORT LAU	9TH CT JDERDALE, FI	_ 33308			
FEI Number:	: 43-2089333	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:					
CORISH, F 1910 NE 5 FORT LAU		_ 33308 US			
	named entity see of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Ag	jent	Date	
		3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CORISH, ROBE 1910 NE 59TH		Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: ROBERT CORISH DPV 07/18/2006