

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000008297

FILED
Oct 08, 2008
Secretary of State

Entity Name: ARG WELLNESS CENTER CORP.

Current Principal Place of Business:

3990 W. FLAGLER ST., SUITE 304
MIAMI, FL 33134

New Principal Place of Business:

Current Mailing Address:

3990 W. FLAGLER ST., SUITE 304
MIAMI, FL 33134

New Mailing Address:

FEI Number: 20-4169667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OBESO, ANGELA M
3990 W. FLAGLER ST., SUITE 304
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

ORDONEZ, LORENA
3990 W. FLAGLER ST., SUITE 304
MIAMI, FL 33134 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: LORENA ORDONEZ

10/08/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: OBESO, ANGELA M
Address: 3990 W. FLAGLER ST., SUITE 304
City-St-Zip: MIAMI, FL 33134

Title: PD (X) Delete
Name: OBESO, ANGELA M
Address: 3990 W FLAGLER STREET SUITE 304
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ORDONEZ, LORENA
Address: 3990 W. FLAGLER ST., SUITE 304
City-St-Zip: MIAMI, FL 33134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LORENA ORDONEZ

P

10/08/2008

Electronic Signature of Signing Officer or Director

Date