

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000058790

FILED
Feb 17, 2011
Secretary of State

Entity Name: HEALING LASER CLINICS, INC.

Current Principal Place of Business:

450 SAINT CHARLES CT.
STE 1000
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

450 SAINT CHARLES CT.
STE 1000
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 22-3929654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

MARINO, MARK
383 HICKORY SPRINGS PLACE
DEBARY
FL, FL 32713 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: MARK MARINO

02/17/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MARINO, MARK
Address: 450 SAINT CHARLES CT. STE 1000
City-St-Zip: LAKE MARY, FL 32746

Title: VPDT
Name: MORGAN, MELISSA
Address: 450 SAINT CHARLES CT. STE 1000
City-St-Zip: LAKE MARY, FL 32746

Title: SD
Name: MARINO, KENNETH M
Address: 450 SAINT CHARLES CT. STE 1000
City-St-Zip: LAKE MARY, FL 32746

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: MARK MARINO

PD

02/17/2011

Electronic Signature of Signing Officer or Director

Date