

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 04, 2011
Secretary of State

Entity Name: HEALTH AND WELL-BEING THERAPY CENTER II, INCORPORATION

Current Principal Place of Business:

2700 NORTH MACDILL AVENUE
SUITE 110 & 111
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 151195
TAMPA, FL 33684

New Mailing Address:

FEI Number: 20-4953856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, BRENDA
2714 W OHIO AVE
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: RAMOS, MARIA A
Address: 3402 W. PINE STREET
City-St-Zip: TAMPA, FL 33607

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: MARIA RAMOS

P

04/04/2011

Electronic Signature of Signing Officer or Director

Date