

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000080669

**FILED**  
**Jul 26, 2010**  
**Secretary of State**

**Entity Name:** A HEALTHY MIND FOR YOU, INC.

**Current Principal Place of Business:**

370 CAMINO GARDENS BLVD  
SUITE 117  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

370 CAMINO GARDENS BLVD  
SUITE 212  
BOCA RATON, FL 33432 US

**Current Mailing Address:**

370 CAMINO GARDENS BLVD  
STE 117  
BOCA RATON, FL 33432 US

**New Mailing Address:**

PO BOX 1321  
BOCA RATON, FL 33429 US

**FEI Number:** 16-1763429

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LANDER, STEVEN ESQ  
315 SE 7TH STREET SUITE 100  
FT LAUDERDALE, FL 33301 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: PD  
Name: LOMASKY, HARYCE  
Address: 370 CAMINO GARDENS BLVD STE 212  
City-St-Zip: BOCA RATON, FL 33432

Title: MGR  
Name: LOMASKY, JANNE  
Address: 370 CAMINO GARDENS BLVD STE 212  
City-St-Zip: BOCA RATON, FL 33432

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: JANNE LOMASKY

MGR

07/26/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date