2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2008
Secretary of State

DOCUMENT# P06000153922

Entity Name: LIFESTYLE INSTITUTE FOR ENERGY MEDICINE GROUP, INC.

Current Principal Place of Business:

1784 ABBOTS HILL DRIVE
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

1784 ABBOTS HILL DRIVE
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 20-8048564 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YOSHIDA, JENNY
314 LAGRANDE BLVD.
SUITE B
LADY LAKE, FL 32159 US

Name and Address of New Registered Agent:

SWART, BAUMRUK & COMPANY, LLP
717 EAST OAK STREET
KISSIMMEE, FL 34744 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: HARRY J. SWART, CPA 01/04/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete
Name: YOSHIDA, JENNY MD
Address: 1784 ABBOTS HILL DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: DIR ( ) Delete
Name: PALACIOS, OSCAR
Address: 1784 ABBOTS HILL DRIVE
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: YOSHIDA, JENNY MD
Address: 1784 ABBOTS HILL DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: VPD (X) Change ( ) Addition
Name: PALACIOS, OSCAR
Address: 1784 ABBOTS HILL DRIVE
City-St-Zip: ORLANDO, FL 32835

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: JENNY YOSHIDA, MD PRES 01/04/2008
Electronic Signature of Signing Officer or Director Date