

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000005473

Entity Name: KAIZEN WELLNESS, INC.

FILED  
Mar 17, 2010  
Secretary of State

## Current Principal Place of Business:

4144-2 CLEVELAND AVENUE  
FT MYERS, FL 33901 US

## New Principal Place of Business:

4144 CLEVELAND AVENUE  
STE 2  
FORT MYERS, FL 33901 US

## Current Mailing Address:

4144-2 CLEVELAND AVENUE  
FT MYERS, FL 33901 US

## New Mailing Address:

4144 CLEVELAND AVENUE  
STE 2  
FORT MYERS, FL 33901 US

FEI Number: 20-8242601

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LUCE, CHAD R  
2797 1ST STREET  
#1305  
FORT MYERS, FL 33916 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P,D  
Name: LUCE, CHAD R  
Address: 2797 1ST STREET, #1305  
City-St-Zip: FORT MYERS, FL 33916 US

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: CHAD R. LUCE

P

03/17/2010

Electronic Signature of Signing Officer or Director

Date