

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000034730

FILED
Mar 30, 2008
Secretary of State

Entity Name: INTERNATIONAL WELLNESS ORG. ND, INC

Current Principal Place of Business:

1565 SEABREEZE STREET
CLEARWATER, FL 33756

New Principal Place of Business:

300 S. DUNCAN AVE.
SUITE 292E
CLEARWATER, FL 33756 US

Current Mailing Address:

1565 SEABREEZE STREET
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 20-8696791 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, PAMELLA
1565 SEABREEZE STREET
CLEARWATER, FL 33756 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 () Delete
Name: MOORE, PAMELLA
Address: 1565 SEABREEZE STREET
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAMELLA MOORE

P

03/30/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date