## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000057644

Entity Name: PROFESSIONAL WELLNESS ASSOCIATES, INC.

FILED Mar 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3100 N.W. BOCA RATON BLVD SUITE 221 BOCA RATON, FL 33431

Current Mailing Address: New Mailing Address:

3100 N.W. BOCA RATON BLVD SUITE 221 BOCA RATON, FL 33431

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FILINGS, INC.
3732 N.W. 16TH STREET
FORT LAUDERDALE, FL 33311 US
SIMMONS, MICHAEL J
3100 NW BOCA RATON BLVD
SUITE 221
BOCA RATON, FL 33431 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: MICHAEL J SIMMONS 03/08/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SIMMONS, MICHAEL
 Name:

 Address:
 3100 N.W. BOCA RATON BLVD, SUITE 221
 Address:

 City-St-Zip:
 BOCA RATON, FL 33431
 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: MICHAEL J SIMMONS PRES 03/08/2008