2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000003945

Entity Name: TRUE WELLNESS PA

FILED Jan 06, 2011 Secretary of State

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

1140 W. 50TH ST., #407 1140 W 50TH ST. HIALEAH, FL 33012

407

HIALEAH, FL 33012 US

Current Mailing Address: New Mailing Address:

P.O. BOX 126550 HIALEAH, FL 33012

FEI Number: 26-1775079 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TORRES, NORLAN A PRES TORRES, NORLAN 317 SW 96TH CT. 1140 W 50TH ST MIAMI, FL 33174 407 HIALEAH, FL 33012 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: NORLAN TORRES 01/06/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRFS

TORRES, NORLAN Name: 1140 W 50TH ST #407 Address: City-St-Zip: HIALEAH, FL 33012 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: NORLAN TORRES **PRES** 01/06/2011