2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2010
Secretary of State

DOCUMENT# P08000016792

Entity Name: HEALTH WEB GROUP, CORP.

Current Principal Place of Business:

49 N FEDERAL HWY
STE 220
POMPANO BEACH, FL 33062 US

New Principal Place of Business:

Current Mailing Address:

49 N FEDERAL HWY
STE 220
POMPANO BEACH, FL 33062 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

CRESCITELLI, JOHN
49 N FEDERAL HWY
STE 220
POMPANO BEACH, FL 33062 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P,D
Name: CRESCITELLI, JOHN
Address: 49 N FEDERAL HWY STE 220
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: S
Name: LUNSFORD JR, JAMES A
Address: 49 N FEDERAL HWY STE 220
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: T
Name: LUNSFORD, JAMES A
Address: 49 N FEDERAL HWY STE 220
City-St-Zip: POMPANO BEACH, FL 33062 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: JAMES A. LUNSFORD JR. S,T 05/04/2010

Electronic Signature of Signing Officer or Director Date