2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2011
Secretary of State

DOCUMENT# P08000070210

Entity Name: HEALTHY NETWORK, INC.

Current Principal Place of Business:

4542 W VILLAGE DR
SUITE D
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 340943
TAMPA, FL 33694

New Mailing Address:

FEI Number: 26-3064316 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GONZALEZ, ALEJANDRO
4542 W VILLAGE DR
SUITE D
TAMPA, FL 33624 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

OFFICERS AND DIRECTORS:

Title: PD
Name: GONZALEZ, ALEJANDRO
Address: P.O. BOX 340943
City-St-Zip: TAMPA, FL 33694

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: ALEJANDRO GONZALEZ PD 01/11/2011

Electronic Signature of Signing Officer or Director — Date