2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2011
Secretary of State

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Entity Name: ULTIMATE WELLNESS SOLUTIONS, INC.

Current Principal Place of Business:

2828 JACKSON ST., #G4
FT. MYERS, FL 33901

New Principal Place of Business:

2828 JACKSON ST.
APT G4
FT. MYERS, FL 33901

Current Mailing Address:

2828 JACKSON ST., #G4
FT. MYERS, FL 33901

New Mailing Address:

2828 JACKSON ST.
APT G4
FT. MYERS, FL 33901

FEI Number: 26-3395210 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SILVASHY, RONALD
2828 JACKSON ST., #G4
FT. MYERS, FL 33901 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: P
Name: SILVASHY, RONALD
Address: 2828 JACKSON ST., #G4
City-St-Zip: FT. MYERS, FL 33901

Title: VP
Name: DECKER, RHIANNON
Address: 2828 JACKSON ST APT G4
City-St-Zip: FORT MYERS, FL 33901

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: RHIANNON DECKER VP 04/27/2011

Electronic Signature of Signing Officer or Director — Date