

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000002278

FILED
Jan 08, 2012
Secretary of State

Entity Name: KAIZEN TOTAL WELLNESS, INC.

Current Principal Place of Business:

11505 PALMBRUSH TRAIL
SUITE 220
LAKEWOOD RANCH, FL 34202

New Principal Place of Business:

11505 PALMBRUSH TRAIL
SUITE 220
LAKEWOOD RANCH, FL 34202 UN

Current Mailing Address:

11505 PALMBRUSH TRAIL
SUITE 220
LAKEWOOD RANCH, FL 34202

New Mailing Address:

FEI Number: 26-3994125 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MISHNER, HARVEY
11505 PALMBRUSH TRAIL
SUITE 220
LAKEWOOD RANCH, FL 34202 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: MISHNER, HARVEY
Address: 11505 PALMBRUSH TRAIL SUITE 220
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: VP
Name: MISHNER, HARVEY
Address: 11505 PALMBRUSH TRAIL SUITE 220
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: S
Name: MISHNER, HARVEY
Address: 11505 PALMBRUSH TRAIL SUITE 220
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: T
Name: MISHNER, HARVEY
Address: 11505 PALMBRUSH TRAIL SUITE 220
City-St-Zip: LAKEWOOD RANCH, FL 34202

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: HARVEY MISHNER

P

01/08/2012

Electronic Signature of Signing Officer or Director

Date