

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000002369

FILED
Apr 12, 2011
Secretary of State

Entity Name: EAST/WEST ACUPUNCTURE & WELLNESS CENTER INC.

Current Principal Place of Business:

10943 COUNTRYWAY BLVD.
TAMPA, FL 33626

New Principal Place of Business:

Current Mailing Address:

10943 COUNTRYWAY BLVD.
TAMPA, FL 33626

New Mailing Address:

FEI Number: 26-4024715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTERS, RASHELLA
8736 HAMPDEN DRIVE
TAMPA, FL 33626 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: MASTERS, RASHELLA
Address: 8736 HAMPDEN DRIVE
City-St-Zip: TAMPA, FL 33626

Title: VP
Name: SMALLEY, JANIE
Address: 8736 HAMPDEN DRIVE
City-St-Zip: TAMPA, FL 33626

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: RASHELLA MASTERS

PRES

04/12/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date