## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P09000016531

Entity Name: GALANT HEALING INC

FILED Apr 05, 2012 Secretary of State

Current Principal Place of Business: New Principal Plac	e of Business:
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4000 N. CYPRESS DR. 4000 N. CYPRESS DR.

101

POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 US

Current Mailing Address: New Mailing Address:

4000 N. CYPRESS DR. 4000 N. CYPRESS DR.

01 101

POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 US

FEI Number: 26-4290248 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GALANT, SHARON 4000 N. CYPRESS DR. 101

101 POMPANO BEACH, FL 33069 US

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:

 Name:
 GALANT, SHARON T

 Address:
 4000 N. CYPRESS DR., #101

 City-St-Zip:
 POMPANO BEACH, FL 33069

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: GALANT SHARON P 04/05/2012