

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000094773

FILED  
Jan 12, 2010  
Secretary of State

Entity Name: ZAMBRANA GLOBAL WELLNESS, INC.

**Current Principal Place of Business:**

6842 - 145TH PLACE NORTH  
PALM BEACH GARDENS, FL 33418 US

**New Principal Place of Business:**

**Current Mailing Address:**

3162 SW 141ST AVENUE  
MIAMI, FL 33175 US

**New Mailing Address:**

FEI Number: 27-1334876

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CONSULTING SERVICES OF SOUTH FLORIDA, INC.  
2121 PONCE DE LEON BLVD.  
SUITE #1050  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: VARGAS BELTRAN, CARLOS  
Address: 6842 - 145TH PLACE N.  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: SD  
Name: GARCIA, DANIEL J  
Address: 6842 - 145TH PLACE N.  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VPD  
Name: VARGAS, VIVIENNE  
Address: 6842 - 145TH PLACE N.  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: TD  
Name: VARGAS, AMANDA V  
Address: 6842 - 145TH PLACE N.  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: DANIEL J GARCIA

SD

01/12/2010

Electronic Signature of Signing Officer or Director

Date