2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000100755

Entity Name: GET CREDIT HEALTHY INC.

FILED Apr 11, 2012 Secretary of State

New Principal Place of Business: Current Principal Place of Business:

250 NW 23RD ST 250 NW 23RD ST **UNIT 205**

205

MIAMI, FL 33127 MIAMI, FL 33127 US

Current Mailing Address: New Mailing Address:

PO BOX 545965 250 NW 23RD ST

SURFSIDE, FL 33154 US 205 MIAMI, FL 33127 US

FEI Number: 27-1469589 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:

POMERANZ AND ASSOCIATES PA ELIZABETH, KARWOWSKI 1920 E HOLLANDALE BEACH BLVD 250 NW 23RD ST

205 802 HALLANDALE BEACH, FL 33009 US MIAMI, FL 33127 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: ELIZABETH KARWOWSKI 04/11/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

KARWOWSKI, ELIZABETH Name:

PO BOX 545965 Address:

City-St-Zip: SURFSIDE, FL 33154 US

Title:

Name: KARWOWSKI, ELIZABETH

Address: PO BOX 545965 SURFSIDE, FL 33154 City-St-Zip:

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.

Ρ SIGNATURE: ELIZABETH KARWOWSKI 04/11/2012