

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000103065

FILED
Apr 19, 2012
Secretary of State

Entity Name: CALIFORNIA WELLNESS COMPANY, INC

Current Principal Place of Business:

507 TYRELLA AVE.
MOUNTAIN VIEW, CA 94043

New Principal Place of Business:

Current Mailing Address:

507 TYRELLA AVE.
MOUNTAIN VIEW, CA 94043

New Mailing Address:

FEI Number: 27-1583274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, ROSA E
16132 NW 14 COURT
PEMBROKE PINES, FL 33028 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: SANMIGUEL-RIGUEROS, PAOLA A
Address: 507 TYRELLA AVE.
City-St-Zip: MOUNTAIN VIEW, CA 94043

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: PAOLA SANMIGUEL RIGUEROS

P

04/19/2012

Electronic Signature of Signing Officer or Director

Date