

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000034643

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Entity Name:** WEALTH, HEALTH & TECHNOLOGY, INC.

**Current Principal Place of Business:**

10114 BLOOMFIELD DRIVE  
SEFFNER, FL 33584

**New Principal Place of Business:**

**Current Mailing Address:**

10114 BLOOMFIELD DRIVE  
SEFFNER, FL 33584

**New Mailing Address:**

P.O. BOX 75673  
TAMPA, FL 33675

**FEI Number:** 80-0583365

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARLOWE, MCNABB & STAYTON, P.A.  
1560 W CLEVELAND  
TAMPA, FL 33606 US

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

MARLOWE MCNABB P.A.  
1560 W CLEVELAND  
TAMPA, FL 33606 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: STEPHEN D. MARLOWE

02/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: RAMIREZ, FELIX G  
Address: 10114 BLOOMFIELD DRIVE  
City-St-Zip: SEFFNER, FL 33584

Title: VP  
Name: QUEVEDO, SERGIO E  
Address: 2005 DERBYWOOD DR.  
City-St-Zip: BRANDON, FL 33510

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: FELIX G. RAMIREZ

DP

02/22/2011

Electronic Signature of Signing Officer or Director

Date