

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000043053

FILED
Apr 28, 2011
Secretary of State

Entity Name: INTERNATIONAL WELLNESS NETWORK, INC

Current Principal Place of Business:

3472 NW 112TH WAY
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3472 NW 112TH WAY
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LUCIANI, MICHAEL A
5550 NW 61ST STREET
#518
COCONUT CREEK, FL 33073 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: D
Name: LUCIANI-RUIZ, PAMELA J
Address: 3472 NW 112TH WAY
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D
Name: LUCIANI, MICHAEL A
Address: 5550 NW 61ST STREET #518
City-St-Zip: COCONUT CREEK, FL 33073

Title: D
Name: LUCIANI-SHAPIRO, LINDA
Address: 12063 ROYAL PALM BLVD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D
Name: LUCIANI-BRESLAW, JILL L
Address: 2801 NW 79TH AVE
City-St-Zip: MARGATE, FL 33063

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: PAMELA LUCIANI RUIZ

D

04/28/2011

Electronic Signature of Signing Officer or Director

Date