## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000064186

Entity Name: FLORIDA HEALTH DISTRIBUTOR INC

FILED Apr 28, 2012 Secretary of State

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

1951 ESTANCIA CIRCLE
KISSIMMEE, FL 34741 US

11424 KENLEY CIRCLE
ORLANDO, FL 32824 US

Current Mailing Address: New Mailing Address:

P.O BOX 452323 P O BOX 452323

KISSIMMEE, FL 34745 US ORLANDO, FL 32837 US

FEI Number: 27-3273880 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:

MORALES, LUIS A

1951 ESTANCIA CIRCLE
KISSIMMEE, FL 34741 US

MORALES, LUIS A

11424 KENLEY CIRCLE
ORLANDO, FL 32824 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: LUIS A MORALES 04/28/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: MORALES, LUIS A
Address: 11424 KENLEY CIRCLE
City-St-Zip: ORLANDO, FL 32824 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: LUIS MORALES P 04/28/2012