

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000089487

Entity Name: WELLQUEST HEALTH, INC

FILED  
Jan 17, 2012  
Secretary of State

**Current Principal Place of Business:**

2921-A VINELAND RD  
KISSIMMEE, FL 34746

**New Principal Place of Business:**

**Current Mailing Address:**

301 W PLATT ST  
97  
TAMPA, FL 33606

**New Mailing Address:**

117 W ALEXANDER ST  
316  
PLANT CITY, FL 33563

FEI Number: 27-3904773

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CARROZZELLA, JOHN DR  
117 W ALEXANDER ST  
316  
PLANT CITY, FL 33563 US

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

CARROZZELLA, JOHN C DR  
117 W ALEXANDER ST  
316  
PLANT CITY, FL 33563 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: JOHN C CARROZZELLA

01/17/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARROZZELLA, JOHN C DR  
Address: 117 W ALEXANDER ST UNIT 316  
City-St-Zip: PLANT CITY, FL 33563

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: JOHN C CARROZZELLA

DR

01/17/2012

Electronic Signature of Signing Officer or Director

Date