

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000102042

Entity Name: WELLNESS WISE INC

FILED
Mar 14, 2012
Secretary of State

Current Principal Place of Business:

6800 NW MONOCO COURT
PORT ST LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

6800 NW MONOCO COURT
PORT ST LUCIE, FL 34983

New Mailing Address:

FEI Number: 20-5384005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WISE, TRINA
6800 NW MONOCO COURT
PORT ST LUCIE, FL 34983 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: WISE, TRINA
Address: 6800 NW MONOCO COURT
City-St-Zip: PORT ST LUCIE, FL 34983

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: TRINA WISE

P

03/14/2012

Electronic Signature of Signing Officer or Director

Date