FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

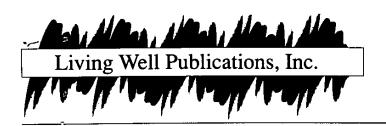
of the corporation or the receiver or trustee empowered of attachment with an address, with all other like empowered.

SIGNATURE:

FILED DOCUMENT # P 930000 16380 Living Well Publications, INC. 05 JAN -6 AH 11: 07 -SECRETARY OF STATE TALLAHASSEL FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business POBOX 24155 5/03 SANJUAN AVE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State JACKSONVIll Not Applicable \$8.75 Additional 32210 Dura 5, Certificate of Status Desired Fee Required Drua 7. Name and Address of Current Registered Agent TRUCK DO NOT WRITE Street Address (P.O. Box IN THIS SPACE Jacksonville 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. I am familiar with, and accept the obligations of registered agent. January 1 - May 1 Fee Is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS NAME STREET ADDRESS 5103 SAN JUAN AVE CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 200043245252 12706704=01057=0085**150:00 MILE TITLE NAME STREET ADDRESS CITY:ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under path; 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 in Block 10 or on an attraction of the corporation of the corporation of the corporation of the corporation of the same legal effect as if made under our trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attraction of the corporation of the co

(904) 631-1662

12/2/04



Post Office Box 24155 Jacksonville, FL 32241

(904) 260-4996

Fax: (904) 262-3062 Cell: (904) 631-1662

January 3, 2005

Ref. Number: P93000016380 Living Well Publications, Inc.

Letter Number: 104A00068135

To Whom It May Concern:

Please apply the \$150 sent to your office in December 2004, for our 2005 UBR filing report payment.

The form is attached with other documentation.

Thanking you in advance,

Trudy Pascucci