2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000046894

Entity Name: HEALTH BOUTIQUE, INC.

FILED Jan 11, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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112 N. BIRCH RD. 411 N NEW RIVER DR E

SUITE 501 UNIT 1104

FT. LAUDERDALE, FL 333044352 US FT. LAUDERDALE, FL 333018102 US

Current Mailing Address: New Mailing Address:

112 N. BIRCH RD. 411 N NEW RIVER DR E

SUITE 501 UNIT 1104

FT. LAUDERDALE, FL 333044352 US FT. LAUDERDALE, FL 333018102 US

FEI Number: 65-0499798 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:

KIPNIS, ALAN
350 E LAS OLAS BLVD

KIPNIS, ALAN
200 E LAS OLAS BLVD

STE 1700 STE 1700

FORT LAUDERDALE, FL 333011156 US FORT LAUDERDALE, FL 333011156 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: 01/11/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 DIANE BERGHEIM,
 Name:

 Address:
 3100 N OCEAN BLVD APT 801
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33308
 City-St-Zip:

Title: VPST () Delete Title: VPST (X) Change () Addition

Name: B.J. FABRIC, Name: B.J. FABRIC,

Address: 112 N. BIRCH RD., STE. 501 Address: 411 N NEW RIVER DR E, UNIT 1104 City-St-Zip: FT. LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BJ FABRIC VPST 01/11/2007