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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000002286

1. Corporation Name

WELLNESS SUCCESS GROUP, INCORPORATED

Principal Place	e of Business	Mailing Address			
1774 BAY DR		1774 BAY DR			
POMPANO BCH FL 33062		POMPANO BCH FL 33062			DO NOT WRITE IN THIS SPACE
US		US			<u> </u>
					3. Date Incorporated or Qualifed 01/09/1995
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0550208 Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			S8.75 Additional
22	.,	27			5. Certificate of Status Desired Fee Required
City & State	a	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip Country			Zip Country		8. This corporation owes the current year Intangible
24	25 29 30		- ·		Personal Property Tax.
9. Name and Address of Current Registered Agent			+		10. Name and Address of New Registered Agent
	o. realite area readings of our out		81	Name	
PATELLA, RONALD					
	SOUTHWEST EIGHTH COURT		82	Street /	Address (P.O. Box Number is Not Acceptable)
	TATION FL 33317		83		
	(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(00		
			84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: F				it signature r	equired when reinstating) OATE OCCUPANIES TO OCCUPANIES
12.			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Р	☐ DELETE	1.1 TITLE		. Cusude C voninou
NAME	SCANLON, PAULA		1.2 NAME		001 00
STREET ADDRESS	17327 CLUB HILL DR.		1.3 STREE	ADDRESS	1774 BOY DI - 2742
CITY-ST-ZIP	DALLAS TX 75248		1.4 CITY-S	r-zip	Pannan Beach H SSUGA
TITLE	VP	☐ DELETÉ	2.1 TITLE		Change Addition
NAME	GALLARDO, LOUIS		2.2 NAME		LITTLE RAN DC
STREET ADDRESS	17327 CLUB HILL DRIVE		2.3 STREE	ADDRESS	22412
CITY-ST-ZIP	DALLAS TX 75248	i	2. 4 CITY-5	T-ZIP	Pompan Beach FL 33062
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS		3.33		TADDRESS	,
CITY-ST-ZIP			3.4. CITY-5		·
TITLE			4.1 TITLE		☐ Change ☐ Addition
NAME		_	4. 2 NAME		}
				TADDRES\$	
STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY-S 5.1 TITLE	1-ZIP	☐ Change ☐ Addition
TITLE			5.1 HILE 5.2 NAME		
NAME				T ADDOESS	
STREET ADDRESS				TADDRESS	
CITY-ST-ZIP			5.4 CITY-S 6.1 TITLE	1-ZIP	Change Addition
TITLE		☐ DELETE			[Citalige Addition
NAME			6.2 NAME		
ATREET ARRESTS			63 STREE	TADDRESS	i)

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: