

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000084086

Entity Name: FLORIDA WELLNESS, INC.

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

4365 TAMIAMI TRAIL
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 110615
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 65-0622474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALLACHINO, SAMUEL R
4759 TAMIAMI TRAIL NORTH
NAPLES, FL 34103 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: BALLACHINO, SAMUEL R.
Address: 4759 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34103 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: BALLACHINO, SAMUEL R
Address: 4759 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34103 US

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: SAMUEL R BALLACHINO

PRES

04/25/2006

Electronic Signature of Signing Officer or Director

Date