2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000096119

Entity Name: CWMC EQUIPMENT CORPORATION

FILED Feb 18, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

929 N. SPRING GARDEN AVE. STE. #100 DELAND, FL 32720

Current Mailing Address: New Mailing Address:

929 N. SPRING GARDEN AVE. STE. #100 DELAND, FL 32720

FEI Number: 59-3412695 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:

COMPLETE WELLNESS CENTERS, INC.
929 N. SPRING GARDEN AVE.
921 N. SPRING GARDEN AVE.
929 N. SPRING GARDEN AVE.
921 N. SPRING GARDEN AVE.
922 N. SPRING GARDEN AVE.
923 N. SPRING GARDEN AVE.
924 N. SPRING GARDEN AVE.
925 N. SPRING GARDEN AVE.
925 N. SPRING GARDEN AVE.

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: 02/18/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: TIMKO, JOHN R

Address: 929 N. SPRING GARDEN AVE., SUITE 100

City-St-Zip: DELAND, FL 32720

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: JOHN R TIMKO PRES 02/18/2011