

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000096119

FILED
Apr 27, 2012
Secretary of State

Entity Name: CWMC EQUIPMENT CORPORATION

Current Principal Place of Business:

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

New Principal Place of Business:

844 N. STONE ST.
202
DELAND, FL 32720

Current Mailing Address:

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

New Mailing Address:

844 N. STONE ST.
202
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:

COMPLETE WELLNESS CENTERS, INC.
929 N. SPRING GARDEN AVE.
SUITE 100
DELAND, FL 32720 US

Name and Address of New Registered Agent:

COMPLETE WELLNESS CENTERS, INC.
844 N. STONE ST.
202
DELAND, FL 32720 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: JOHN R. TIMKO

04/27/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: TIMKO, JOHN R
Address: 844 N. STONE ST. STE 202
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

P

04/27/2012

Electronic Signature of Signing Officer or Director

Date