2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000069497

FILED Feb 18, 2008 Secretary of State

Entity Name: ADVANCED COUNSELING AND HYPNOTHERAPY CENTER, INC.

of Business:	New Principal Place	of Business:
DRIVE		
7 US		
ss:	New Mailing Address	5:
DRIVE		
7 US		
FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Current Registered Agent:	Name and Address o	f New Registered Agent:
P LE 7 US		
submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
nic Signature of Registered Age	ent	Date
g Trust Fund Contribution ().		
TORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS
) Delete JO-ANN P NE CIRCLE FL 32137	Title: Name: Address: City-St-Zip:	() Change () Addition
) Delete	Title: Name:	() Change () Addition
	DRIVE 7 US 6s: DRIVE 7 US FEI Number Applied For () Current Registered Agent: P LE 7 US submits this statement for the p nic Signature of Registered Age g Trust Fund Contribution (). TORS: Delete JO-ANN P NE CIRCLE FL 32137	DRIVE 7 US 8s: New Mailing Address DRIVE 7 US FEI Number Applied For () FEI Number Not Applicable () Current Registered Agent: Name and Address of the purpose of changing its registered PLE 7 US Submits this statement for the purpose of changing its registered nic Signature of Registered Agent g Trust Fund Contribution (). TORS: ADDITIONS/CHANGE JO-ANN P Name:

I hereby certify that the information supplied with this filing does not qualify 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: JO ANN P. ROSENBAUM DIR 02/18/2008