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FILED

Jun 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000073775 (3)

1. Corporation Name
INTERNATIONAL WELLNESS ASSOCIATION, INC.



Principal Place of Business
703 CT. ST.
CLEARWATER FL 33756-5507

Mailing Address
703 CT. ST.
CLEARWATER FL 33756-5507

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 POB 66128

27 Suite, Apt. #, etc.

28 City & State ST. PETERSBURG BEACH, FL

29 Zip Country 33736-6118 USA

3. Date Incorporated or Qualified

08/25/1997

4. FEI Number

59-3491163

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

JENNINGS, THOMAS C III
703 CT. ST.
CLEARWATER FL 33756-5507

COURT

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE SECRETARY-TREASURER DELETE

NAME MARTIN DRILICH

STREET ADDRESS PO Box 66128 33736-6128

CITY-ST-ZIP ST PETERSBURG BEACH, FL

TITLE PRESIDENT DELETE

NAME MARK MANOULA

STREET ADDRESS 1355 BRIGHTWATERS BLVD NE

CITY-ST-ZIP ST PETERSBURG, FL 33704

TITLE THAD BENTLEY DELETE

NAME THAD BENTLEY

STREET ADDRESS PO Box 66128

CITY-ST-ZIP ST PETERSBURG BEACH, FL 33736-6128

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS N/A

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME DELETE

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE DIRECTOR, PRESIDENT Change Addition

3.2 NAME

3.3 STREET ADDRESS 2111 DREN ST

3.4 CITY-ST-ZIP CLEARWATER, FL 33765

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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

SIGNATURE Martin Drilich

CR2E034 (10/97)