

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000079942

Entity Name: HEALTH WISDOM, INC.

FILED
Jan 12, 2012
Secretary of State

Current Principal Place of Business:

1835-5 EAST WEST PKWY
FLEMING ISLAND, FL 32003

New Principal Place of Business:

1835 EAST WEST PKWY
#5
FLEMING ISLAND, FL 32003

Current Mailing Address:

1835 EAST WEST PKWY
#5
FLEMING ISLAND, FL 32003

New Mailing Address:

1835 EAST WEST PKWY
#5
FLEMING ISLAND, FL 32003

FEI Number: 59-3474140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, KAM P
1835-5 EAST WEST PKWY
FLEMING ISLAND, FL 32003 US

Name and Address of New Registered Agent:

LEE, KAM P
1835 EAST WEST PKWY
#5
FLEMING ISLAND, FL 32003 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:

01/12/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: LEE, KAM P MR.
Address: 1905 BLUEBONNET WAY
City-St-Zip: ORANGE PARK, FL 32003 US

Title: V. P
Name: LEE, NGHI M MRS.
Address: 1905 BLUEBONNET WAY
City-St-Zip: ORANGE PARK, FL 32003 US

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: KAM P. LEE

PRES

01/12/2012

Electronic Signature of Signing Officer or Director

Date