

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000095195

FILED
Jul 07, 2004
Secretary of State

Entity Name: WHOLE HEALTH CHIROPRACTIC & WELLNESS INC.

Current Principal Place of Business:

654 N UNIVERSITY DR
PEMBROKE PINES, FL 33024

New Principal Place of Business:

1405 SW 107TH AVE
SUITE 217 C
MIAMI, FL 33174

Current Mailing Address:

654 N UNIVERSITY DR
PEMBROKE PINES, FL 33024

New Mailing Address:

1405 SW 107TH AVE
SUITE 217 C
MIAMI, FL 33174

FEI Number: 65-0874905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANCO, OLIVIO O JR
654 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

BLANCO, OLIVIO O JR
1405 SW 107TH AVE
SUITE 217C
MIAMI, FL 33174 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: OLIVIO O BLANCO JR

07/07/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BLANCO, OLIVIO O JR
Address: 654 N UNIVERSITY DR
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BLANCO, OLIVIO O JR
Address: 1405 SW 107TH AVE
City-St-Zip: MIAMI, FL 33174

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: OLIVIO O BLANCO JR.

DR

07/07/2004

Electronic Signature of Signing Officer or Director

Date