

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024943

Entity Name: TREE OF HEALTH, INC.

FILED
Apr 23, 2004
Secretary of State

Current Principal Place of Business:

6312 BLACKFOOT TRAIL
GRANBURY, TX 76049

New Principal Place of Business:

Current Mailing Address:

9011 SOUTHWEST 138TH
B-6
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0904233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROW, TRUDY
9011 SOUTHWEST 138TH STREET B-6
MIAMI, FL 33176

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CROW, TRUDY
Address: 6312 BLACKFOOT TRAIL
City-St-Zip: GRANBURY, TX 76049

Title: D () Delete
Name: CROW, LARRY
Address: 6312 BLACKFOOT TRAIL
City-St-Zip: GRANBURY, TX 76049

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TRUDY CROW

PD

04/23/2004

Electronic Signature of Signing Officer or Director

Date