

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000084895

Entity Name: PURE HEALTHY BACK, INC.

Current Principal Place of Business:

1030 N ORANGE AVE
STE 300
ORLANDO, FL 32801

Current Mailing Address:

1030 N ORANGE AVE
STE 300
ORLANDO, FL 32801

FEI Number: 61-1580268

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SZPORKA, MARK
1030 N ORANGE AVE
300
ORLANDO, FL 32801 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEOD
Name LUBINSKY, RANDY
Address 1030 N ORANGE AVE, STE 300
City-State-Zip: ORLANDO FL 32801

Title CFOD
Name SZPORKA, MARK
Address 1030 N ORANGE AVE, STE 300
City-State-Zip: ORLANDO FL 32801

Title PRESIDENT
Name EVANGER, JIM
Address 1030 N ORANGE AVE
 STE 300
City-State-Zip: ORLANDO FL 32801

Title COO
Name HOLZAPFEL, HENRY
Address 1030 N ORANGE AVE
 STE 300
City-State-Zip: ORLANDO FL 32801

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: MARK SZPORKA

CFO

02/08/2014

Electronic Signature of Signing Officer/Director Detail

Date