

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000079942

Entity Name: HEALTH WISDOM, INC.

Current 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

FEI Number: 59-3474140

Certificate of Status Desired: Yes

Name and Address of Current 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name LEE, KAM PMR.
Address 1905 BLUEBONNET WAY
City-State-Zip: ORANGE PARK FL 32003

Title V. P
Name LEE, NGHI MMRS.
Address 1905 BLUEBONNET WAY
City-State-Zip: ORANGE PARK FL 32003

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 LEE

PRESIDENT

01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date