

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000010826

**FILED**  
**Apr 20, 2012**  
**Secretary of State**

**Entity Name:** HEALTHYWAY PRODUCTION INC.

**Current Principal Place of Business:**

231 174TH ST  
1811  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

27 DORTMUNDER DR  
MANALAPAN, NJ 07726

**New Mailing Address:**

**FEI Number:** 27-1839794

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ACKERMAN, LILY  
231 174TH ST  
1811  
SUNNY ISLES BEACH, FL 33160 US

**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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ACKERMAN, LILY  
Address: 231 174TH ST #1811  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: LILY ACKERMAN

P

04/20/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date