

ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT FOR
A NONQUALIFIED DEFERRED COMPENSATION PLAN

To: Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-5644
US Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

In accordance with 29 CFR Section 2520.104-23 of the Department of Labor Regulations, which provides an alternative method for complying with the reporting and disclosure requirements of Part 1 of Title I of the Employee Retirement Income Security Act of 1974, you are hereby notified that the Employer identified below maintains the Plan identified below for the purpose of providing deferred compensation for a select group of management or highly compensated employees, and that all benefits provided by this Plan are paid as needed solely from the general assets of that Employer.

Employer's Name: To Help Everyone Health and Wellness Centers

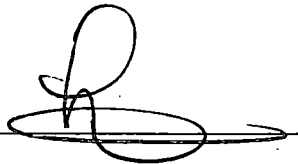
Employer's Address: 3834 S. Western Ave.
Los Angeles, CA 90062

Employer Identification Number: 23-7351622

457(b) Eligible Deferred Compensation
plan, which covers 1 Participant(s).

Total Number of 457(b) Plans: 1

By: LILIA MARIN



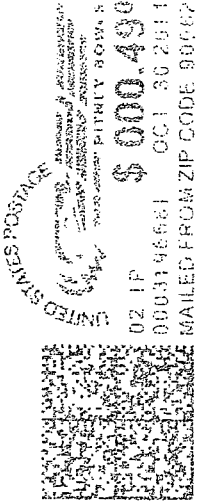
Date: OCTOBER 29, 2014.

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EBSA/PUBLIC AFFAIRS



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