2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007427

Entity Name: UNITED AROMATHERAPY EFFORT INC

Current Principal Place of Business:

C/O DEDI THORNE 12915 SUMPTER ROAD CARLETON, MI 48117 FILED
Mar 09, 2020
Secretary of State
6818906590CC

Current Mailing Address:

210 WEST FRONT STREET #2085 PO BOX 2085 MONROE, MI 48161 US

FEI Number: 20-5202617 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JUDY, KLISPIE 711 FOX GATE COURT PLANT CITY, FL 33563 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: JUDY KLISPIE 03/09/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

NameHANGER, SYLLANameRASMUSSON, DOUG EAddress16018 SADDLESTRING DRAddress232 CHEMIN DE SALGUES

City-State-Zip: TAMPA FL 33618 City-State-Zip: FLAYOSC 83780

TitleVPTitleTREASURERNameKLISPIE, JUDYNameKINTER, KARENAddress711 FOX GATE COURTAddress404 8TH ST NW.

City-State-Zip: PLANT CITY, FL 33563 City-State-Zip: FOSSTON, MN 56542

TitleDIRECTORTitleDIRECTORNameBĚLÍKOVÁ, HANA VIOLANameKRYDIN, AMY

Address DVOULETKY 169 Address 7601 PHEASANT ROCK ROAD

City-State-Zip: PRAGUE 10000 City-State-Zip: AUSTIN TX 78729

Title PRESIDENT Title SECRETARY

Name THORNE, DEDI Name WILSON, JENNIFER

Address 210 WEST FRONT STREET #2085 Address 171 SPIDERLILY LANE

PO BOX 2085 City-State-Zip: SAINT MATTHEWS SC 29135

City-State-Zip: MONROE MI 48161

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JUDY KLISPIE VP 03/09/2020