#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001623

Entity Name: THE EXCLUSIVE WELLNESS CENTER, INC.

FILED
May 01, 2016
Secretary of State
CC9796787661

## **Current Principal Place of Business:**

4210 EMPIRE PLACE TAMPA, FL 33610

## **Current Mailing Address:**

4210 EMPIRE PLACE TAMPA, FL 33610 US

FEI Number: 26-1919328 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

WRIGHT, ALISHIA S 4210 EMPIRE PLACE TAMPA, FL 33610 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 Title TD

Name WRIGHT, ALISHIA S Name SINCLAIR, KENNETH T

Address 4210 EMPIRE PLACE Address 3657 SUGAR CREEK DRIVE

City-State-Zip: TAMPA FL 33610 City-State-Zip: TAMPA FL 33619

Title SD

Name ABDULLAH, DELLA

Address 2121 BARCELONA WAY SOUTH City-State-Zip: ST PETERBURG FL 33712

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: ALISHIA S. WRIGHT

**PRESIDENT** 

05/01/2016