## **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000009515

Entity Name: CONCUSSIONS, PAIN, MENTAL HEALTH AWARENESS INC.

FILED
Mar 17, 2020
Secretary of State
3541401788CC

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

203 VIA EMILIA

PALM BEACH GARDENS, FL 33418

## **Current Mailing Address:**

203 VIA EMILIA

PALM BEACH GARDENS. FL 33418 US

FEI Number: 46-3929039 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DWORK, ALEXANDER BRANDON 203 VIA EMILIA PALM BEACH GARDENS, FL 33418 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: ALEXANDER BRANDON DWORK 03/17/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title FOUNDER Title TREASURER

Name DELL AQUILA, PAOLO Name DWORK, JANET WEISS

Address 748 WEST JASMIINE DR Address 203 VIA EMILIA

City-State-Zip: LAKE PARK FL 33403 City-State-Zip: PALM BEACH GARDENS FL 33418

Title PRESIDENT

Name DWORK, ALEXANDER BRANDON

Address 203 VIA EMILIA

City-State-Zip: PALM BEACH GARDENS FL 33418

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: ALEXANDER DWORK

Electronic Signature of Signing Officer/Director Detail

PRESIDENT 03/17/2020

Date