

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M59036

Entity Name: THE BISCAYNE INSTITUTES FOR HEALTH AND LIVING, INC.

Current Principal Place of Business:

101 NORTH OCEAN DRIVE
SUITE 252
HOLLHWOOD, FL 33109

Current Mailing Address:

101 NORTH OCEAN DRIVE
SUITE 252
HOLLYWOOD, FL 33109 US

FEI Number: 65-0003906

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GELLER, JOSEPH
100 WEST CYPRESS CREEK ROAD
SUITE 700
FORT LAUDERDALE, FL 33309 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 PSTD
Name DICOWDEN, MARIE A DR.
Address 3610 YACHT CLUB DR
#1108
City-State-Zip: AVENTURA FL 33180

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: MARIE A DICOWDEN

PTSD

04/29/2018

Electronic Signature of Signing Officer/Director Detail

Date