

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000006821

**Entity Name:** NATURAL HEALING, INC.

**Current Principal Place of Business:**

5951 NW 173 DR  
UNIT 7  
MIAMI, FL 33015

**Current Mailing Address:**

5951 N.W. 173RD DRIVE, SUITE 7  
HIALEAH, FL 33015 US

**FEI Number:** 65-0975464

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

STEPANOV, TERESA  
7944 NW 190 TERR.  
MIAMI, FL 33015 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            D  
Name            STEPANOV, TERESA  
Address        7944 NW 190 TERR.  
City-State-Zip: MIAMI FL 33015

*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:** TERESA STEPANOV

**PRESIDENT**

**02/21/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date