

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000068646

Entity Name: VITAL HEALTH CORPORATION**Current Principal Place of Business:**6150 METROWEST BLVD
204
ORLANDO, FL 32835**Current Mailing Address:**P.O. BOX 2155
WINDERMERE, FL 34786**FEI Number:** 59-3659281**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORREA, JULIO
6150 METROWEST BLVD # 204
ORLANDO, FL 32835 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	SECRETARY
Name	CORREA, JULIO	Name	DIVINE, SERGIO
Address	6150 METROWEST BLVD # 204	Address	6150 METROWEST BLVD # 204
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835

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: SERGIO DIVINE**SECRETARY****03/14/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date