

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000046812

**Entity Name:** ACUPUNCTURE AND WELLNESS CENTER OF OVIEDO INC.

**Current Principal Place of Business:**

3233 MCEWAN LANE  
ORLANDO, FL 32812

**Current Mailing Address:**

3233 MCEWAN LANE  
ORLANDO, FL 32812

**FEI Number:** 37-1465595

**Certificate of Status Desired:** No

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

NELSON, KIRA  
3233 MCEWAN LANE  
ORLANDO, FL 32812 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 NELSON, KIRA  
Address 3233 MCEWAN LANE  
City-State-Zip: ORLANDO FL 32812

*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:** KIRA NELSON

**OWNER**

**02/27/2015**

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

\_\_\_\_\_  
Date