

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000021859

**FILED**  
**Jul 17, 2022**  
**Secretary of State**  
**2145068994CC**

**Entity Name:** ADVANCED WELLNESS AND REHABILITATION CENTER, CORP

**Current Principal Place of Business:**

14934 N FLORIDA AVE  
TAMPA, 33614

**Current Mailing Address:**

14934 N FLORIDA AVE  
TAMPA, 33614 UN

**FEI Number: 80-0366842**

**Certificate of Status Desired: No**

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

PLEASANT, ELSIE  
14934 N FLORIDA AVE  
TAMPA, FL 33614 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: ELSIE PLEASANT**

**07/17/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	V	Title	P
Name	PLEASANT, ELSIE	Name	ZACCARI, JAMES A. D.O.
Address	14934 N FLORIDA AVE	Address	14934 N FLORIDA AVE
City-State-Zip:	TAMPA FL 33614	City-State-Zip:	TAMPA FL 33614

*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: ELSIE PLEASANT**

**VP**

**07/17/2022**

Electronic Signature of Signing Officer/Director Detail

Date