2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2017
Secretary of State
CC0817136259

DOCUMENT# P09000084315

Entity Name: COMPLETE MEDICAL & WELLNESS CENTER INC

Current Principal Place of Business:

3990 W FLAGLER ST
SUITE 203
MIAMI, FL 33134

Current Mailing Address:

3990 W FLAGLER ST
SUITE 203
MIAMI, FL 33134 US

FEI Number: 27-1126804

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARBOLAEZ, LIUBA
2600 NW 25 AVE
1409
MIAMI, FL 33142 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	P
Name	ARBOLAEZ, LIUBA
Address	2600 NW 25 AVE APT1409
City-State-Zip:	MIAMI FL 33142

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: LIUBA ARBOLAEZ PRESIDENT 04/25/2017

Electronic Signature of Signing Officer/Director Detail — Date