

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000025577

**Entity Name:** HERBAL WELL CORP

**Current Principal Place of Business:**

11361 NW 42 TER  
DORAL, FL 33178

**Current Mailing Address:**

11361 NW 42 TER  
DORAL, FL 33178

**FEI Number:** 27-2190954

**Certificate of Status Desired:** No

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

KAUFMAN, DOMINGA B  
1550 WEST 44 PLACE  
E006  
HIALEAH, FL 33012 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 KAUFMAN, JOHN R  
Address 5570 NW 107AVE  
#910  
City-State-Zip: DORAL FL 33178

Title VP  
Name KAUFMAN, DOMINGA B  
Address 1550 WEST 44 PLACE E006  
City-State-Zip: HIALEAH FL 33012

*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:** JOHN KAUFMAN

**PRESIDENT**

**03/13/2013**

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

\_\_\_\_\_  
Date