

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000095487

Entity Name: CENTER FOR INDIVIDUALIZED MEDICINE AND AGE
MANAGEMENT, INC.

Current Principal Place of Business:

11616 LAKE UNDERHILL RD
SUITE 205
ORLANDO, FL 32825

Current Mailing Address:

11616 LAKE UNDERHILL RD
SUITE 205
ORLANDO, FL 32825

FEI Number: 46-1499784

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DONIS SILVA, MILDRED DR.
11616 LAKE UNDERHILL RD
SUITE 205
ORLANDO, FL 32825 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: MILDRED DONIS SILVA

04/26/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name DONIS RIVERA, MILDRED MD
Address 11616 LAKE UNDERHILL RD, SUITE
205
City-State-Zip: ORLANDO FL 32825

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: MILDRED DONIS RIVERA, MD

PRESIDENT

04/26/2017

Electronic Signature of Signing Officer/Director Detail

Date