DOCUMENT# P16000016771

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: ACADEMY OF REGENERATIVE PRACTICES, INC.

Current Principal Place of Business:

1290 WESTON ROAD #203A WESTON, FL 33326

Current Mailing Address:

1290 WESTON ROAD #203A WESTON, FL 33326 US

FEI Number: 47-2213850

Name and Address of Current Registered Agent:

MANN, SHAWN 1290 WESTON ROAD #203A WESTON, FL 33327 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: SHAWN MANN

Electronic Signature of Registered Agent

Officer/Director Detail :

TitlePRESIDENTNameCOMELLA, KRISTINAddress1290 WESTON ROAD
#203ACity-State-Zip:WESTON FL 33327

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.

OFFICER

SIGNATURE: KRISTIN COMELLA

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

01/17/2022 Date

01/17/2022 Date