

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000067636

Entity Name: MIAMI INTEGRATIVE WELLNESS CORP

Current Principal Place of Business:

168 SE 1ST ST
SUITE 807
MIAMI, FL 33131

Current Mailing Address:

168 SE 1ST ST
SUITE 807
MIAMI, FL 33131

FEI Number: 82-2450135

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NUNEZ, SUSANA
50 BISCAYNE BLVD
APT 3704
MIAMI, FL 33132 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 NUNEZ, SUSANA
Address 50 BISCAYNE BLVD
APT 3704
City-State-Zip: MIAMI FL 33132

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: SUSANA NUNEZ

PRESIDENT

02/20/2019

Electronic Signature of Signing Officer/Director Detail

Date