

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000080898

**Entity Name:** JKMS WELLNESS INC.

**Current Principal Place of Business:**

410 N DALE MABRY HWY  
TAMPA, FL 33609

**Current Mailing Address:**

410 N DALE MABRY HWY  
TAMPA, FL 33609

**FEI Number:** 83-2008076

**Certificate of Status Desired:** No

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

PLGL INC  
410 N DALE MABRY HWY  
TAMPA, FL 33609 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            PRESIDENT  
Name            MATHERSON, KEVIN  
Address        410 N DALE MABRY HWY  
City-State-Zip: TAMPA    33609

Title            VP  
Name            GENSEL, JUSTIN  
Address        410 N DALE MABRY HWY  
City-State-Zip: TAMPA    FL 33609

Title            VP  
Name            SULTANIA, SUNIL  
Address        5753 SAYBROOK CIR.  
City-State-Zip: SANFORD   FL 32771

*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:** KEVIN MATHERSON

**PRESIDENT**

**02/04/2019**

Electronic Signature of Signing Officer/Director Detail

Date