

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000021414

**Entity Name:** PALM BEACH MED SPA, INC.

**Current Principal Place of Business:**

270 S CENTRAL BLVD #202  
JUPITER, FL 33458

**Current Mailing Address:**

270 S CENTRAL BLVD #202  
JUPITER, FL 33458 US

**FEI Number: 83-3977384**

**Certificate of Status Desired: No**

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

DUBROW DUKER & ASSOCIATES, P.A.  
5401 N. UNIVERSITY DRIVE  
SUITE 204  
CORAL SPRINGS, FL 33067 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 PS  
Name DEL CARMEN ROSADO, NORINE  
Address 3012 EMBASSY DR.  
City-State-Zip: WEST PALM BEACH FL 33401

Title VP  
Name WYLIE, JOHN  
Address 270 S CENTRAL BLVD #202  
City-State-Zip: JUPITER FL 33458

Title T  
Name RICCIARDI, BENJAMIN M  
Address 4572 AVOCADO DR.  
City-State-Zip: WEST PALM BEACH FL 33411

*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 WYLIE**

**VICE PRESIDENT**

**04/22/2021**

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

\_\_\_\_\_  
Date