# 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000009896

Entity Name: ALIVE & BLOSSOM HEALTHCARE LLC, A PRIMARY AND

PREVENTION CARE CLINIC

FILED
Mar 28, 2024
Secretary of State
5683884484CC

# **Current Principal Place of Business:**

1325 S INTERNATIONAL PKWY SUITE 2221 LAKE MARY, FL 32746

# **Current Mailing Address:**

1157 E WINGED FOOT CIRCLE WINTER SPRING, FL 32708 US

FEI Number: 86-1936022 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

VALCOURT, MARGALY 1157 E WINGED FOOT CIRCLE WINTER SPRING, FL 32708 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 F

Name VALCOURT, MARGALY

Address 1157 E WINGED FOOT CIRCLE City-State-Zip: WINTER SPRING FL 32708

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.