

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000025181

**Entity Name:** FLIP MY LIFE WELLNESS INC.

**Current Principal Place of Business:**

10951 CHERRY LAKE ROAD  
CLERMONT, FL 34715

**Current Mailing Address:**

10951 CHERRY LAKE ROAD  
CLERMONT, FL 34715

**FEI Number: 88-1543171**

**Certificate of Status Desired: No**

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

TORRES LAW, P.A.  
888 SOUTHEAST THIRD AVENUE, STE. 400  
FORT LAUDERDALE, FL 33316 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            D  
Name            CAMMARANO, JOHN  
Address        10951 CHERRY LAKE ROAD  
City-State-Zip: CLERMONT FL 34715

*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 CAMMARANO**

**D**

**04/24/2023**

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

\_\_\_\_\_  
Date