

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000081834

**Entity Name:** XCELLENCY & WELLNESS INC

**Current Principal Place of Business:**

313 SW 190 TER  
SW 190TH TER  
PEMBROKE PINES, FL 33029

**Current Mailing Address:**

313 SW 190TH TER  
SW 190TH TER  
PEMBROKE PINES, FL 33029 US

**FEI Number:** 93-4614047

**Certificate of Status Desired:** No

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

INTEGRA CORPORATE SERVICES  
313 SW 190TH TER  
PEMBROKE PINES, FL 33029 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 WANG, XIYAO  
Address 11300 NE SECOND AVE  
City-State-Zip: MIAMI SHORES FL 33161

*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:** XIYAO WANG

**PRESIDENT**

**04/28/2024**

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

\_\_\_\_\_  
Date