

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000078635

Entity Name: ACUPUNCTURE AND NATURAL HEALTH SOLUTIONS, PLLC

Current Principal Place of Business:

2355 VANDERBILT BEACH ROAD
SUITE 146
NAPLES, FL 34109

Current Mailing Address:

6017 PINE RIDGE RD
#347
NAPLES, FL 34119 US

FEI Number: 27-0737387

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EATROS, TONI L
6017 PINE RIDGE RD
#347
NAPLES, FL 34119 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

Authorized Person(s) Detail :

Title MGRM
Name EATROS, TONI L
Address 3821 11TH AVE SW
City-State-Zip: NAPLES FL 34117

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TONI EATROS

MGRM

02/17/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date