## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000153988

Entity Name: OASIS COUNSELING & WELLNESS LLC

Current Principal Place of Business:

2719 HOLLYWOOD BLVD SUITE 2 HOLLYWOOD, FL 33020

**Current Mailing Address:** 

2719 HOLLYWOOD BLVD SUITE 2 HOLLYWOOD, FL 33020 US

FEI Number: 81-3892517 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FILGUEIRAS, TAMARA 2719 HOLLYWOOD BLVD SUITE 2 HOLLYWOOD, FL 33020 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

FILED Apr 25, 2017

**Secretary of State** 

CC3729281948

## Authorized Person(s) Detail:

Title PRESIDENT

Name FILGUEIRAS, TAMARA
Address 2719 HOLLYWOOD BLVD

SUITE 2

City-State-Zip: HOLLYWOOD FL 33020

SIGNATURE: TAMARA FILGUEIRAS

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.

Electronic Signature of Signing Authorized Person(s) Detail

**PRESIDENT** 

04/25/2017

Date