

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90189 021 ***550.00

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1. Entity Name

DIABETES WELLNESS SOLUTIONS, P.A.



Principal Place of Business

**882 WOODBINE DRIVE
MERRITT ISLAND FL 32952**

Mailing Address

**882 WOODBINE DRIVE
MERRITT ISLAND FL 32952**

2. Principal Place of Business

451 Aruba Court

Suite, Apt. #, etc.

3. Mailing Address

451 Aruba Court

Suite, Apt. #, etc.

City & State

Satellite Beach, FL

Zip

32937

Country

City & State

Satellite Beach, FL

Zip

32937

Country

4. FEI Number

59-3599214

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

GLATTER, SUSAN M

882 WOODBINE DRIVE

MERRITT ISLAND FL 32952

7. Name and Address of New Registered Agent

Name **Susan M. Glatter**

Street Address (P.O. Box Number is Not Acceptable)

451 Aruba Court

City

Satellite Beach

FL

Zip Code

32937

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

**PDST
GLATTER, SUSAN M
882 WOODBINE DRIVE
MERRITT ISLAND FL 32952**

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

**451 Aruba Court
Satellite Beach, FL 32937**

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Susan M. Glatter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/12/03

Date

(321) 777-8513

Daytime Phone #

CR2E034 (10/02)