

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023814

Entity Name: ONLINE HEALTHNOW, INC.**Current Principal Place of Business:**1010 SYNC STREET
SUITE 100
MORRISTOWN, NC 27560**Current Mailing Address:**1745 BROADWAY
C/O BERTELSMANN, INC.
NEW YORK, NY 10019 US**FEI Number: 59-3631180****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	CEO, DIRECTOR
Name	TRIANDIFLOU, JAMES
Address	1010 SYNC STREET SUITE 100
City-State-Zip:	MORRISTOWN NC 27560

Title	CFO
Name	RUSCH, PHILIPP
Address	1010 SYNC STREET SUITE 100
City-State-Zip:	MORRISTOWN NC 27560

Title	DIRECTOR
Name	GABOR, JAROSLAW
Address	1745 BROADWAY
City-State-Zip:	NEW YORK NY 10019

Title	SECRETARY
Name	HARVEY, JOHN
Address	1010 SYNC STREET SUITE 100
City-State-Zip:	MORRISTOWN NC 27560

Title	VP
Name	DAHDOULI, MAYSA
Address	1745 BROADWAY
City-State-Zip:	NEW YORK NY 10019

Title	ASSISTANT SECRETARY
Name	NORIEGA, VERA L.
Address	1745 BROADWAY
City-State-Zip:	NEW YORK NY 10019

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: VERA L. NORIEGA**ASSISTANT SECRETARY 03/19/2019**

Electronic Signature of Signing Officer/Director Detail

Date