### 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000035527

Entity Name: AMERICAN BACK AND WELLNESS CENTER, INC.

FILED
Mar 12, 2016
Secretary of State
CC9071448589

# **Current Principal Place of Business:**

2699 STIRLING RD SUITE C-405

FT. LAUDERDALE, FL 33312

### **Current Mailing Address:**

P.O BOX 741622

BOYNTON BEACH, FL 33474

FEI Number: 65-1025559 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

MANDELSTEIN, BRIAN CPRESIDE 7399 VIA LURIA LAKE WORTH, FL 33467 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 PSTD

Name MANDELSTEIN, BRIAN CPRES

Address 7399 VIA LURIA

City-State-Zip: LAKE WORTH FL 33467

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.

Electronic Signature of Signing Officer/Director Detail