

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000001461

**Entity Name:** LIFE REMEDIES, P.A.

**Current Principal Place of Business:**

13400 SUTTON PARK DR. SOUTH, STE. 1103  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

13400 SUTTON PARK DR. SOUTH, STE. 1103  
JACKSONVILLE, FL 32224

**FEI Number:** 59-3694786

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GOECKEL, STANLEY B  
3439 DOCKSIDER DR. SOUTH  
JACKSONVILLE, FL 32257 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 DPST  
Name MANUEL, VICTORIA C  
Address 14558 MARSH BREEZE CT  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*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:** VICTORIA MANUEL

P

02/10/2019

Electronic Signature of Signing Officer/Director Detail

Date