

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000005246

Entity Name: TRIM WELLNESS, INC.

Current Principal Place of Business:

10470 NORTHCLIFFE
SUITE 1
SPRING HILL, FL 34608

Current Mailing Address:

10470 NORTHCLIFFE
SUITE 1
SPRING HILL, FL 34608 US

FEI Number: 59-3692157

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHILLIPS, CAROL
8303 SCOTCH PINE AVE.
BROOKSVILLE, FL 34613 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 D
Name PHILLIPS, FRED
Address 8303 SCOTCH PINE AVE.
City-State-Zip: BROOKSVILLE FL 34613

Title D
Name PHILLIPS, CAROL
Address 8303 SCOTCH PINE AVE.
City-State-Zip: BROOKSVILLE FL 34613

Title D
Name KNEIP, ANGELA
Address 10447 NORVELL RD.
City-State-Zip: SPRING HILL FL 34608

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: CAROL PHILLIPS

VICE PRES.

04/04/2015

Electronic Signature of Signing Officer/Director Detail

Date