

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034653

Entity Name: JOLANDA'S HEALING TOUCH, INC.

Current Principal Place of Business:

820 2ND STREET
LAKE PARK, FL 33403

Current Mailing Address:

820 2ND STREET
LAKE PARK, FL 33403

FEI Number: 65-1095940

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRADY, JOLANDA
820 2ND STREET
LAKE PARK, FL 33403 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 BRADY, JOLANDA
Address 820 2ND STREET
City-State-Zip: LAKE PARK FL 33403

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: JOLANDA BRADY

LMT OWNER

03/13/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date