#### above, or on an attachment with all other like empowered. SIGNATURE: SHAN LIANG PRESIDENT

Electronic Signature of Signing Officer/Director Detail

# 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000083728

## Entity Name: CENTER FOR ACUPUNCTURE & ORIENTAL MEDICINE, INC.

#### **Current Principal Place of Business:**

1219 EAST AVENUE S. SUITE 206 SARASOTA, FL 34239-2355

## **Current Mailing Address:**

7515 CAMDEN HARBOUR DR. BRADENTON, FL 34212

## FEI Number: 65-1199059

## Name and Address of Current Registered Agent:

LIANG, SHAN 7515 CAMDEN HARBOUR DR. BRADENTON, FL 34212 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

## **Officer/Director Detail :**

PD Title LIANG. SHAN Name Address 7515 CAMDEN HARBOUR DR. City-State-Zip: BRADENTON FL 34212

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

01/22/2017 Date

FILED Jan 22, 2017 Secretary of State CC4888903484

Certificate of Status Desired: No

Date