

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150558

Entity Name: WEST BROWARD WELLNESS CENTER, INC.

Current Principal Place of Business:

6846 N. UNIVERSITY DR
TAMARAC, FL 33321

Current Mailing Address:

6846 N. UNIVERSITY DR
TAMARAC, FL 33321 US

FEI Number: 20-0480091

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BENJAMIN, HAROLD
5640 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021 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: HAROLD BENJAMIN

02/11/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP

Name DAHDAH, KYZOR

Address 6846 N. UNIVERSITY DR

City-State-Zip: TAMARAC FL 33321

Title DV

Name COHEN, TERI H

Address 6846 NORTH UNIVERSITY DRIVE

City-State-Zip: TAMARAC FL 33321

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: KYZOR M DAHDAH

DR

02/11/2025

Electronic Signature of Signing Officer/Director Detail

Date