

2015 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: No

Name and Address of Current Registered Agent:

LANDES, MICHAEL H
1160B EAST HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 33009 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	DP	Title	DV
Name	DAHDAH, KYZOR	Name	COHEN, TERI
Address	6846 N. UNIVERSITY DR	Address	6846 N. UNIVERSITY DR
City-State-Zip:	TAMARAC FL 33321	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 DAHDAH

OFFICER

02/16/2015

Electronic Signature of Signing Officer/Director Detail

Date