

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000104716

Entity Name: THE WELLNESS EXPERIENCE OF WELLINGTON, INC.

Current Principal Place of Business:

9180 FOREST HILL BLVD.
WELLINGTON, FL 33411

Current Mailing Address:

9180 FOREST HILL BLVD.
WELLINGTON, FL 33411

FEI Number: 14-1936988

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAURICH, RANDALL FD.C.
8933 ALEXANDRA CIRCLE
WELLINGTON, FL 33414 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 LAURICH, RANDALL F
Address 8933 ALEXANDRA CIRCLE
City-State-Zip: WELLINGTON FL 33414

Title SECRETARY, LORRAINE WISOTSKY-
LAURICH
Name WISOTSKY-LAURICH, LORRAINE C
Address 8933 ALEXANDRA CIRCLE
City-State-Zip: WELLINGTON FL 33414

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: RANDALL LAURICH

01/19/2016

Electronic Signature of Signing Officer/Director Detail

Date