

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000073731

**Entity Name:** NATURE MADE WELLNESS INC.

**Current Principal Place of Business:**

150 BANYAN CIR.  
JUPITER, FL 33458

**Current Mailing Address:**

P.O. BOX 9051  
RIVIERA BEACH, FL 33419

**FEI Number:** 27-0850851

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ST-RIVAL, WILFIX  
150 BANYAN CIR  
JUPITER, FL 33458 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 ST-RIVAL, WILFIX  
Address 150 BANYAN CIR  
City-State-Zip: WEST PALM BEACH FL 33458

*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:** WILFIX ST-RIVAL

D

04/29/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date