## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000045508

Entity Name: FAMWELL HEALING CENTER, CORP.

**Current Principal Place of Business:** 

7975 SW 120 PLACE MIAMI. FL 33183

**Current Mailing Address:** 

7975 SW 120 PLACE MIAMI, FL 33183 US

FEI Number: 38-3842118 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTELLANO, AILEEN 7975 SW 120 PLACE MIAMI, FL 33183 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: AILEEN CASTELLANO 04/30/2018

Electronic Signature of Registered Agent

Officer/Director Detail:

Title P Title VP

NameCASTELLANO, AILEENNameNUNEZ, MICHAEL AAddress7975 SW 120 PLACEAddress7975 SW 120 PLACECity-State-Zip:MIAMI FL 33183City-State-Zip:MIAMI FL 33183

Title TREA Title SECT

 Name
 NUNEZ, DANIEL T
 Name
 NUNEZ, GABRIEL M

 Address
 7975 SW 120 PLACE
 Address
 7975 SW 120 PLACE

 City-State-Zip:
 MIAMI FL 33183
 City-State-Zip:
 MIAMI FL 33183

Title ASSO

Name NUNEZ, KATRINA C Address 7975 SW 120 PLACE City-State-Zip: MIAMI FL 33183

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: AILEEN CASTELLANO PRES

Electronic Signature of Signing Officer/Director Detail

04/30/2018 Date

FILED Apr 30, 2018

**Secretary of State** 

CC4808861450

Date