

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000000370

Entity Name: SHARON LAROSA NATURAL MEDICINE, INC.

Current Principal Place of Business:

2427 TULIP STREET
SARASOTA, FL 34239

Current Mailing Address:

2427 TULIP STREET
SARASOTA, FL 34239

FEI Number: 45-4172035

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEHMANN LAROSA, SHARON
2427 TULIP STREET
SARASOTA, FL 34239 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 P
Name SEHMANN LAROSA, SHARON
Address 2427 TULIP STREET
City-State-Zip: SARASOTA FL 34239

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: SHARON SEHMANN LAROSA

PRESIDENT

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date