

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000012211

**Entity Name:** GOLD FUNCTIONAL WELLNESS INC.

**Current Principal Place of Business:**

20184 PALM ISLAND DRIVE  
BOCA RATON, FL 33498

**Current Mailing Address:**

20184 PALM ISLAND DRIVE  
BOCA RATON, FL 33498

**FEI Number:** 46-2044391

**Certificate of Status Desired:** No

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

GOLDGEWICHT, RICHARD  
20184 PALM ISLAND DRIVE  
BOCA RATON, FL 33498 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 PSD  
Name GOLDGEWICHT, RICHARD  
Address 20184 PALM ISLAND DRIVE  
City-State-Zip: BOCA RATON FL 33498

*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:** RICHARD GOLDGEWICHT

**PRESIDENT**

**03/25/2016**

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

\_\_\_\_\_  
Date