

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000091779

Entity Name: PALMETTO WELLNESS CLINIC, INC

Current Principal Place of Business:

1840 W 49 ST.
107
HIALEAH, FL 33012

Current Mailing Address:

1336 NW 84TH AVE
DORAL, FL 33126 US

FEI Number: 46-4078090

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLINA, OSCAR
1840 W 49 ST.
107
HIALEAH, FL 33012 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 MOLINA, OSCAR
Address 1840 W 49 ST. #107
City-State-Zip: HIALEAH FL 33012

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: OSCAR MOLINA

PRES

04/14/2016

Electronic Signature of Signing Officer/Director Detail

Date