## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000091779

Entity Name: PALMETTO WELLNESS CLINIC, INC

Current Principal Place of Business:

1840 W 49 ST.

1040 W 49

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

FILED Apr 23, 2019

**Secretary of State** 

8260060169CC

## Officer/Director Detail:

Title F

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.

**PRES** 

Electronic Signature of Signing Officer/Director Detail

04/23/2019