

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000039730

**Entity Name:** 4CELLFIX INC

**Current Principal Place of Business:**

4005 FIESTA PLAZA  
TAMPA, FL 33607

**Current Mailing Address:**

4005 FIESTA PLAZA  
TAMPA, FL 33607 US

**FEI Number:** 46-5611469

**Certificate of Status Desired:** No

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

VITAL-HERNE, KATIA  
4005 FIESTA PLAZA  
TAMPA, FL 33607 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:** KATIA VITAL-HERNE

04/29/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                      |                 |                         |
|-----------------|----------------------|-----------------|-------------------------|
| Title           | P                    | Title           | VP                      |
| Name            | VITAL-HERNE, KATIA C | Name            | VITAL-HERNE, EMMANUEL W |
| Address         | 4005 FIESTA PLAZA    | Address         | 4005 FIESTA PLAZA       |
| City-State-Zip: | TAMPA FL 33607       | City-State-Zip: | TAMPA FL 33607          |

*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:** KATIA C VITAL-HERNE

**MEMBER**

04/29/2022

Electronic Signature of Signing Officer/Director Detail

Date