

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000057859

**Entity Name:** HEALTH MESSAGE INC

**Current Principal Place of Business:**

6741 SW 24TH STREET  
STE 56-57  
MIAMI, FL 33155

**Current Mailing Address:**

6741 CORAL WAY  
56-57  
MIAMI, FL 33155 US

**FEI Number:** 47-4547504

**Certificate of Status Desired:** No

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

XU, BING  
6741 CORAL WAY  
STE 56-57  
MIAMI, FL 33155 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 PSTD  
Name XU, BING  
Address 6741 CORAL WAY  
56-57  
City-State-Zip: MIAMI FL 33155

*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:** BING XU

**PRESIDENT**

**02/01/2018**

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

\_\_\_\_\_  
Date