

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000003198

Entity Name: IMMANUEL HEALING ROOM, INC

Current Principal Place of Business:

4179 NORTH STATE ROAD 7
LAUDERDALE LAKES, FL 33319

Current Mailing Address:

4179 NORTH STATE ROAD 7
LAUDERDALE LAKES, FL 33319

FEI Number: 81-1022958

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REID, LORNA
4179 NORTH STATE ROAD 7
LAUDERDALE LAKES, FL 33319 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: LORNA REID

06/21/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name REID, LORNA
Address 4179 NORTH STATE ROAD 7
City-State-Zip: LAUDERDALE LAKES FL 33319

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: LORNA REID

OWNER

06/21/2019

Electronic Signature of Signing Officer/Director Detail

Date