

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000033928

Entity Name: BAUTISTA HEALTH & WELLNESS, INC.**Current Principal Place of Business:**2221 NE 40TH COURT
LIGHTHOUSE POINT, FL 33064**Current Mailing Address:**2221 NE 40TH COURT
LIGHTHOUSE POINT, FL 33064 US**FEI Number: 82-1082372****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAUTISTA, MARGARET R
2221 NE 40TH COURT
LIGHTHOUSE POINT, FL 33064 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	BAUTISTA, MARGARET R
Address	2221 NE 40TH COURT
City-State-Zip:	LIGHTHOUSE POINT FL 33064

Title	SECT
Name	BAUTISTA, MARGARET R
Address	2221 NE 40TH COURT
City-State-Zip:	LIGHTHOUSE POINT FL 33064

Title	VP
Name	BAUTISTA, MARGARET R
Address	2221 NE 40TH COURT
City-State-Zip:	LIGHTHOUSE POINT FL 33064

Title	TREA
Name	BAUTISTA, MARGARET R
Address	2221 NE 40TH COURT
City-State-Zip:	LIGHTHOUSE POINT FL 33064

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: MARGARET R. BAUTISTA**PRESIDENT****04/20/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date