

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000059584

Entity Name: NIRVANA MEDICAL SPA INC

Current Principal Place of Business:

2457 SW 27TH AVE
OCALA, FL 34471

Current Mailing Address:

2457 SW 27TH AVE
OCALA, FL 34471 US

FEI Number: 82-2148486

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATEL, DHRUV
4223 SW 33RD ST
OCALA, FL 34474 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 PATEL, NILAM
Address 2723 SW 30TH ST
City-State-Zip: OCALA FL 34471

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: PATEL , NILAM

PRESIDENT

03/21/2019

Electronic Signature of Signing Officer/Director Detail

Date