

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000013039

**Entity Name:** HEALTHY LUNG ASSOCIATES, INC.

**Current Principal Place of Business:**

2951 NW 49TH AVE., STE. 202  
FORT LAUDERDALE, FL 33313

**Current Mailing Address:**

2951 NW 49TH AVE., STE. 202  
FORT LAUDERDALE, FL 33313 US

**FEI Number: 37-1882410**

**Certificate of Status Desired: No**

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

BASTO, JUAN C  
3850 COCONUT CREEK PARKWAY  
STE 3  
COCONUT CREEK, FL 33066 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 D,P  
Name BASTO, JUAN C  
Address 3850 COCONUT CREEK PARKWAY  
STE 3  
City-State-Zip: COCONUT CREEK FL 33066

*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: JUAN BASTO** \_\_\_\_\_

P, D

06/09/2020

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date