

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000063021

Entity Name: NATUREWELLNESS,INCORPORATED

Current Principal Place of Business:

3000 UNIVERSITY DRIVE
SUITE A
CORAL SPRINGS , FL 33065

Current Mailing Address:

9201 SUNRISE LAKES BOULEVARD
304
SUNRISE , FL 33322 US

FEI Number: 26-1226370

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARACENA, MARILYN
9261 SUNRISE LAKES BLVD
304
SUNRISE , FL 33322 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 ARACENA, MARILYN
Address 9261 SUNRISE LAKES BOULEVARD
304
City-State-Zip: SUNRISE FL 33322

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: MARILYN ARACENA

PRESIDENT

01/31/2021

Electronic Signature of Signing Officer/Director Detail

Date