

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000034436

**Entity Name:** SOULSPEAK WELLNESS FLORIDA INC

**Current Principal Place of Business:**

3934 SW 8 STREET  
308  
CORAL GABLES, FL 33134

**Current Mailing Address:**

P.O. BOX 822902  
PEMBROKE PINES, FL 33082 US

**FEI Number:** 83-4634150

**Certificate of Status Desired:** No

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

STEELE, FRANCESCA F  
3914 SW 154TH PLACE  
MIAMI, FL 33185 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                       | Title           | VP                      |
| Name            | STEELE, FRANCESCA F     | Name            | FADIL, CHRISTINE A      |
| Address         | PO BOX 822902           | Address         | P.O. BOX 822902         |
| City-State-Zip: | PEMBROKE PINES FL 33082 | City-State-Zip: | PEMBROKE PINES FL 33082 |

*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:** CHRISTINE FADIL

VP

03/30/2020

Electronic Signature of Signing Officer/Director Detail

Date