

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000065349

Entity Name: HEALTH AND WELLNESS OF LAKE MARY INC

Current Principal Place of Business:

122 N 4TH STREET
SUITE 1022
LAKE MARY, FL 32746

Current Mailing Address:

PO BOX 952427
LAKE MARY, FL 32795

FEI Number: 84-2804000

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALZAYAYDE, WISAM
122 NORTH 4TH STREET
SUITE 1022
LAKE MARY, FL 32746 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 ALZAYAYDE, WISAM
Address 122 NORTH 4TH STREET
SUITE 1022
City-State-Zip: LAKE MARY FL 32746

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: WISAM ALZAYAYDE

OWNER

04/14/2025

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date