

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000083437

**Entity Name:** SHANTI WELLNESS INC.

**Current Principal Place of Business:**

1709 FLETCHER ST  
MELBOURNE, FL 32901

**Current Mailing Address:**

1709 FLETCHER ST.  
MELBOURNE, FL 32901 US

**FEI Number:** 84-2596032

**Certificate of Status Desired:** No

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

GENOVESIO-NIPER, LELE  
1709 FLETCHER ST.  
MELBOURNE, FL 32901 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:** GENOVESIO-NIPER, LELE

02/24/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name GENOVESIO-NIPER, LELE  
Address 1709 FLETCHER ST.  
City-State-Zip: MELBOURNE FL 32901

*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:** LELE GENOVESIO-NIPER

OWNER

02/24/2025

Electronic Signature of Signing Officer/Director Detail

Date