

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000009874

**Entity Name:** CHIJWA WELLBEING INC

**Current Principal Place of Business:**

8060 SUNRISE LAKES DR N  
SUNRISE, FL 33322

**Current Mailing Address:**

8060 SUNRISE LAKES DR N  
SUNRISE, FL 33322 US

**FEI Number:** 84-4457524

**Certificate of Status Desired:** No

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

MANDEL, FRED  
8060 SUNRISE LAKES DR N  
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 SHARMA, SUBASH DR  
Address 8060 SUNRISE LAKES DR N  
City-State-Zip: SUNRISE FL 33322

Title VP  
Name SHARMA, GITA  
Address 8060 SUNRISE LAKES DR N  
City-State-Zip: SUNRISE FL 33322

Title S  
Name MCKNIGHT, SEETA  
Address 8060 SUNRISE LAKES DR N  
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:** SEETA MCKNIGHT

02/25/2022

Electronic Signature of Signing Officer/Director Detail

Date