

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000071896

**Entity Name:** GAINESVILLE ACUPUNCTURE & HOLISTIC MEDICINE INC.

**Current Principal Place of Business:**

4040 W NEWBERRY RD., #1500  
GAINESVILLE, FL 32607

**Current Mailing Address:**

3825 SW 100TH STREET  
GAINESVILLE, FL 32608 US

**FEI Number:** 87-2205585

**Certificate of Status Desired:** No

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

PORRAS TOLEDO, ALVARO  
3825 SW 100TH ST  
GAINESVILLE, FL 32608 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 PORRAS TOLEDO, ALVARO  
Address 3825 SW 100TH STREET  
City-State-Zip: GAINESVILLE FL 32608

*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:** ALVARO PORRAS TOLEDO

**PRESIDENT**

**02/06/2022**

Electronic Signature of Signing Officer/Director Detail

Date