2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2025
Secretary of State
5592403313CC

DOCUMENT# P21000095635

Entity Name: MEDSPA OF MOUNT DORA INC.

Current Principal Place of Business:

3619 LAKE CENTER DR.
MOUNT DORA, FL 32757

Current Mailing Address:

3619 LAKE CENTER DR.
MOUNT DORA, FL 32757 US

FEI Number: 87-3495145

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAGEL, SHIRLEY MD
3619 LAKE CENTER DR.
MOUNT DORA, FL 32757 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	D	Title	D
Name	CADY, MATTHEW MD	Name	DAVINA, ELEANOR
Address	3619 LAKE CENTER DR.	Address	3619 LAKE CENTER DR.
City-State-Zip:	MOUNT DORA FL 32757	City-State-Zip:	MOUNT DORA FL 32757

Title	D
Name	NAGEL, SHIRLEY
Address	3619 LAKE CENTER DR.
City-State-Zip:	MOUNT DORA FL 32757

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: MATTHEW CADY DIRECTOR 02/20/2025

Electronic Signature of Signing Officer/Director Detail — Date