

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23000085110

Entity Name: QUALITY OF LIFE PHYSICIAN WEIGHT MANAGEMENT, INC.

Current Principal Place of Business:

403 RIO DEL NORTE RD.
ST. AUGUSTINE, FL 32095

Current Mailing Address:

403 RIO DEL NORTE RD.
ST. AUGUSTINE, FL 32095 US

FEI Number: 93-4796368

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BODIN, SARAH G MD
403 RIO DEL NORTE RD
ST. AUGUSTINE, FL 32095 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 SARAH, BODIN
Address 403 RIO DEL NORTE RD
City-State-Zip: ST. AUGUSTINE FL 32095

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: SARAH BODIN MD

PRESIDENT

01/27/2024

Electronic Signature of Signing Officer/Director Detail

Date