2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2016
Secretary of State
CC6951810214

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Entity Name: FEMWELL GROUP HEALTH, INC.

Current Principal Place of Business:

3225 AVIATION AVE
#700
COCONUT GROVE, FL 33133

Current Mailing Address:

3225 AVIATION AVE
#700
COCONUT GROVE, FL 33133 US

FEI Number: 65-0505313

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEON, FRANCISCO J
3225 AVIATION AVE
#700
COCONUT GROVE, FL 33133 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	CD
Name	HIRSH, NATHAN MD
Address	7300 SW 62ND PLACE, 3RD FLOOR
City-State-Zip:	MIAMI FL 33143

Title	V
Name	GERSTEN, JANET MD
Address	8900 SW 117 AVE #B202
City-State-Zip:	MIAMI FL 33186

Title	PD
Name	LEON, FRANCISCO J
Address	3659 S. MIAMI AVE, SUITE 5005
City-State-Zip:	MIAMI FL 33133

Title	D
Name	YELEN, MITCHELL
Address	3225 AVIATION AVENUE, #500
City-State-Zip:	COCONUT GROVE FL 33133

Title	D
Name	BOYETT, ROBERT MD
Address	8955 SW 87TH COURT SUITE 214
City-State-Zip:	MIAMI FL 33176

Title	D
Name	FIDALGO, EDWARD MD
Address	3659 S. MIAMI AVE,SUITE 5005
City-State-Zip:	MIAMI FL 33133

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: FRANCISCO J. LEON PRESIDENT & COO 03/28/2016

Electronic Signature of Signing Officer/Director Detail — Date