

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000101007

Entity Name: SYNERGETIC HEALTH AND HEALING CENTER, LLC

Current Principal Place of Business:

4637 VINCENNES BLVD
SUITE #4
CAPE CORAL, FL 33904

Current Mailing Address:

4637 VINCENNES BLVD
SUITE #4
CAPE CORAL, FL 33904 US

FEI Number: 45-3062585

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANTAR, BILL CPA
CAPE CORAL TAX & ACCOUNTING SERVICES, LLC
3306 DEL PRADO BLVD. S.
CAPE CORAL, FL 33904 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

Authorized Person(s) Detail :

Title MGRM
Name PAPP, DAWN M
Address 2303 NW 9TH TER
City-State-Zip: CAPE CORAL FL 33993

Title AUTHORIZED MEMBER
Name PAPP, MICHAEL P
Address 2303 NW 9TH TER
City-State-Zip: CAPE CORAL FL 33993

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAWN PAPP

MGRM

03/23/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date