

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000148973

Entity Name: DOWNTOWN WELLNESS CENTER LLC

Current Principal Place of Business:

309 LAKE AVE
LAKE WORTH, FL 33460

Current Mailing Address:

309 LAKE AVE
LAKE WORTH, FL 33460

FEI Number: 46-3937164

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLD, RONALD
309 LAKE AVE
LAKE WORTH, FL 33460 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 GOLD, RONALD
Address 309 LAKE AVE
City-State-Zip: LAKE WORTH FL 33460

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: RONALD GOLD

OWNER

03/04/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date