

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000079301

Entity Name: MAETOZO TOTAL WOMANS CARE, LLC

Current Principal Place of Business:

1301 PLANTATION ISLAND DRIVE
SUITE 103
ST. AUGUSTINE, FL 32080

Current Mailing Address:

1501 YAMATO ROAD SUITE 200 W
BOCA RATON, FL 33431 US

FEI Number: 36-4790827

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UPM SERVICE CORP.
1501 YAMATO ROAD SUITE 200 W
BOCA RATON, FL 33431 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 FLORIDA WOMAN CARE
Address 660 GLADES ROAD, SUITE 340
City-State-Zip: BOCA RATON FL 33431

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: DR. AARON SUDBURY

MGR

03/23/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date