

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000364781

Entity Name: VITALITE WELLNESS CENTER LLC

Current Principal Place of Business:

6443 SW 40TH ST
MIAMI, FL 33155

Current Mailing Address:

6443 SW 40TH ST
MIAMI, FL 33155 US

FEI Number: 99-4556517

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CALZADILLA PARDO, CHE JULIO
6443 SW 40TH ST
MIAMI, FL 33155 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 AMBR
Name CALZADILLA PARDO, CHE JULIO
Address 6443 SW 40TH ST
City-State-Zip: MIAMI FL 33155

Title AMBR
Name DE LA NUEZ ARCE, PALOMA
Address 6443 SW 40TH ST
City-State-Zip: MIAMI FL 33155

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: PALOMA DE LA NUEZ ARCE

BUSINESS MANAGER

03/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date