

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000003318

**Entity Name:** WELLNESS ARE USA INC.

**Current Principal Place of Business:**

6801 NW 77 AVE  
MIAMI, FL 33166

**Current Mailing Address:**

6801 NW 77 AVE  
MIAMI, FL 33166 US

**FEI Number: 86-1589604**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

HERNANDEZ, DAYAMI  
1146 NW 7TH CT  
APT 506  
MIAMI, FL 33136 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 P  
Name HERNANDEZ, DAYAMI  
Address 1146 NW 7TH CT  
APT 506  
City-State-Zip: MIAMI FL 33136

*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: DAYAMI HERNANDEZ**

**OWNER**

**02/05/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date