

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718044

Entity Name: CONCEPT HEALTH SYSTEMS INC.

Current Principal Place of Business:

162 N E 49TH ST
MIAMI, FL 33137

Current Mailing Address:

162 N E 49TH ST
MIAMI, FL 33137 US

FEI Number: 23-7063810

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MORGAN, RICHARD
6100 BLUE LAGOON DRIVE
SUITE 400
MIAMI, FL 33126 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: RICHARD MORGAN

02/01/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIR
Name JACKSON, VALERA
Address 162 NE 49TH STREET
City-State-Zip: MIAMI FL 33137

Title TREASURER
Name STOLZ, ADAM
Address 6100 BLUE LAGOON DRIVE
SUITE 400
City-State-Zip: MIAMI FL 33126

Title ST
Name SILVERMAN, ADAM
Address 6100 BLUE LAGOON DRIVE
SUITE 400
City-State-Zip: MIAMI FL 33126

Title REGISTERED AGENT
Name MORGAN , RICHARD
Address 6100 BLUE LAGOON DRIVE, SUITE
400
City-State-Zip: MIAMI FL 33126

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD MORGAN

REGISTERED AGENT

02/01/2023

Electronic Signature of Signing Officer/Director Detail

Date