

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000009836

**Entity Name:** ALL FLORIDA HEALTHCARE SERVICES, INC.

**Current Principal Place of Business:**

700 S.W. 8 STREET  
MIAMI, FL 33130

**Current Mailing Address:**

700 S.W. 8 STREET  
MIAMI, FL 33130

**FEI Number:** 27-3732309

**Certificate of Status Desired:** Yes

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

IGLESIAS, RAFAEL  
700 S.W. 8 STREET  
MIAMI, FL 33130 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:** RAFAEL IGLESIAS

01/12/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	S/D	Title	PRESIDENT, DIRECTOR
Name	GARCIA, JOSE M	Name	IGLESIAS, RAFAEL
Address	700 SW 8 STREET	Address	700 SW 8TH STREET
City-State-Zip:	MIAMI FL 33130	City-State-Zip:	MIAMI FL 33130

Title	TREASURER
Name	MADARIAGA, LOURDES M
Address	700 S.W. 8 STREET
City-State-Zip:	MIAMI FL 33130

*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:** RAFAEL IGLESIAS

P/CEO

01/12/2023

Electronic Signature of Signing Officer/Director Detail

Date