SIGNATURE: SIOMARA SENISES

above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

Ρ

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

02/27/2024

Date

Certificate of Status Desired: No

Date

FILED Feb 27, 2024 Secretary of State 2679785930CC

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K84517

Entity Name: A WOMAN'S CARE, INC.

Current Principal Place of Business:

68 N.E. 167 STREET SUITE A MIAMI, FL 33162

Current Mailing Address:

68 N.E. 167 STREET SUITE A MIAMI, FL 33162

FEI Number: 65-0122192

Officer/Director Detail :

City-State-Zip: MIAMI FL 33167

PRESIDENT

SENISES, SIOMARA

68 N.E 167TH ST

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

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.

Title

Name

Address City-State-Zip: VP

TURBIDES, MILTA

68 A N.E 167TH ST

N MIAMI FL 33162

SENISES, SIOMARA 68 N.E. 167 TH ST MIAMI, FL 33167 US

SIGNATURE:

Title

Name

Address