

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000033924

Entity Name: ALL CARE MEDICAL CONSULTANTS PA

Current Principal Place of Business:

1745 S HIGHLAND AVE
CLEARWATER, FL 33756

Current Mailing Address:

1745 S HIGHLAND AVE
CLEARWATER, FL 33756

FEI Number: 59-3644247

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YAMANI, MI MD
1745 S. HIGHLAND AVE
CLEARWATER, FL 33756 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	D	Title	TREASURER - VICE PRES.
Name	YAMANI, MI MD	Name	JEHAN, MUSSARAT
Address	1745 HIGHLAND AVE	Address	1745 HIGHLAND AVE
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756

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: MI YAMANI MD

D

01/22/2019

Electronic Signature of Signing Officer/Director Detail

Date