

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000009471

**Entity Name:** RICOTAX & CARE SERVICES INC.**Current Principal Place of Business:**20 E WASHINGTON STREET  
SUITE F  
QUINCY, FL 32351**Current Mailing Address:**2304 WABASH TRAIL  
TALLAHASSEE, FL 32303 US**FEI Number:** 57-1146132**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RICOTAX & CARE SERVICES INC  
2304 WABASH TRAIL  
TALLAHASSEE, FL 32303 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:** ERIC K ABOAGYE

03/04/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	ABOAGYE, ERIC K DR.
Address	2304 WABASH TRAIL
City-State-Zip:	TALLAHASSEE FL 32303

Title	DIRECTOR
Name	ABOAGYE, ERIC KOJO JR.
Address	2304 WABASH TRAIL
City-State-Zip:	TALLAHASSEE FL 32303

Title	VP
Name	FOSU BUAFU, AGNES
Address	2660 HARRISON MILL DR
City-State-Zip:	DOUGLASVILLE GA 30135

Title	COO
Name	DILL, NIKELA
Address	20 E WASHINGTON ST SUITE F
City-State-Zip:	QUINCY FL 32351

Title	DIRECTOR
Name	THOMAS, DOROTHY
Address	20 E WASHINGTON ST SUITE F
City-State-Zip:	QUINCY FL 32351

Title	DIRECTOR
Name	ABOAGYE , LUCIANA YEBOAH
Address	2304 WABASH TRAIL
City-State-Zip:	TALLAHASSEE FL 32303

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:** DR. ERIC K ABOAGYE

PRESIDENT

03/04/2021

Electronic Signature of Signing Officer/Director Detail

Date