DOCUMENT# P04000154255

Entity Name: NATHAN HEALTH & CARE INC.

### **Current Principal Place of Business:**

1345 NORTH VENETIAN WAY MIAMI, FL 33139

## **Current Mailing Address:**

1345 NORTH VENETIAN WAY MIAMI, FL 33139

## FEI Number: 20-1875888

## Name and Address of Current Registered Agent:

NEUWIRTH, YAEL 1345 NORTH VENETIAN WAY MIAMI, FL 33139 US

## Certificate of Status Desired: No

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	SEC	Title	Р	
Name	NATHAN, MIRI	Name	NATHAN, ZVI	
Address	4 OREN STREET	Address	4 OREN STREET	
City-State-Zip:	RAMAT GAN, ISRAEL NA 52655	City-State-Zip:	RAMAT GAN, ISRAEL NA 52655	

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: NATHAN , ZVI

Ρ

02/20/2015

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Feb 20, 2015 Secretary of State CC6770312887