

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000078115

Entity Name: ICARE HEALTH OPTIONS, INC.

Current Principal Place of Business:

7352 N.W. 34TH STREET
MIAMI, FL 33122

Current Mailing Address:

7352 N.W. 34TH STREET
MIAMI, FL 33122

FEI Number: 26-0542739

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRIAN LYNN CPA
TWO SOUTH UNIVERSITY DRIVE
SUITE 215
PLANTATION, FL 33324 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: BRIAN LYNN

01/14/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name STERN, SIDNEY J
Address 7352 N.W. 34TH STREET
City-State-Zip: MIAMI FL 33122

Title T
Name STERN-SKLAR, JODI
Address 7352 N.W. 34TH STREET
City-State-Zip: MIAMI FL 33122

Title S
Name STERN, LEE R.
Address 7352 N.W. 34TH STREET
City-State-Zip: MIAMI FL 33122

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: SIDNEY J STERN

P

01/14/2019

Electronic Signature of Signing Officer/Director Detail

Date