## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000104185

Entity Name: MIA HOME HEALTH CARE SERVICES, INC

**Current Principal Place of Business:** 

604 COURTLAND STREET SUITE 100 &170 ORLANDO, FL 32804 FILED Feb 12, 2024 Secretary of State 5188321680CC

## **Current Mailing Address:**

604 COURTLAND STREET SUITE 100 &170 ORLANDO, FL 32804 US

FEI Number: 26-1100450 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GALE, DONNA M. 3700 COMMERCE PARKWAY MIRAMAR, FL 33025 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: DONNA M. GALE 02/12/2024

**Electronic Signature of Registered Agent** 

Date

Officer/Director Detail:

TitleCOO, DIRECTORTitleVP, DIRECTORNameMENDEZ, LINDANameJOBLOVE, KAREN

Address 3700 COMMERCE PARKWAY Address 3700 COMMERCE PARKWAY

City-State-Zip: MIRAMAR FL 33025 City-State-Zip: MIRAMAR FL 33025

Title DCEO Title DCFO

Name BRADBURY, CHRISTOPHER J. Name KLINK, DONALD K.

Address 3700 COMMERCE PARKWAY Address 3700 COMMERCE PARKWAY

City-State-Zip: MIRAMAR FL 33025 City-State-Zip: MIRAMAR FL 33025

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.