## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000039121

Entity Name: TRINITY HOME HEALTH SERVICES, INC.

**Current Principal Place of Business:** 

3450 WEST 84TH STREET, SUITE 103

MIAMI LAKES. FL 33018

**Current Mailing Address:** 

3450 WEST 84TH STREET, SUITE 103 MIAMI LAKES. FL 33018

FEI Number: 26-2432729 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FERRERA, MARITZA 3408 WEST 84TH STREET SUITE 109 MIAMI LAKES, FL 33018 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

FILED Feb 12, 2019

**Secretary of State** 

2848678182CC

Officer/Director Detail:

Title P Title S

Name FERRERA, MARITZA Name KNOWLES, JAMES

Address 3450 WEST 84TH STREET, SUITE 103 Address 3450 WEST 84TH STREET, SUITE 103

City-State-Zip: MIAMI LAKES FL 33018 City-State-Zip: MIAMI LAKES FL 33018

Title T

Name VALBUENA, PEDRO

Address 3450 WEST 84TH STREET, SUITE 103

City-State-Zip: MIAMI LAKES FL 33018

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.

Electronic Signature of Signing Officer/Director Detail