

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000093749

**Entity Name:** CAPITAL ONE HEALTH CARE CONSULTANTS, CORP.

**Current Principal Place of Business:**

2500 NW 79 AVENUE  
SUITE 261  
DORAL, FL 33122

**Current Mailing Address:**

2500 NW 79 AVENUE  
SUITE 261  
DORAL, FL 33122

**FEI Number:** 61-1572085

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RODRIGUEZ, SONIA R  
2500 NW 79 AVENUE  
SUITE 261  
DORAL, FL 33122 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

**Officer/Director Detail :**

Title P  
Name RODRIGUEZ, SONIA R  
Address 2500 NW 79 AVENUE # 261  
City-State-Zip: DORAL 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:** SONIA RODRIGUEZ

**PRESIDENT/OWNER**

**04/29/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date