

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000074317

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC1795184834**

**Entity Name:** VERITAS NURSE REGISTRY, INC.

**Current Principal Place of Business:**

3925 BOYNTON BEACH BLVD  
STE 103  
BOYNTON BEACH, FL 33436

**Current Mailing Address:**

3925 BOYNTON BEACH BLVD  
STE 103  
BOYNTON BEACH, FL 33436 US

**FEI Number:** 27-0854232

**Certificate of Status Desired:** No

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

CADIZ JR, EDUARDO T  
3925 BOYNTON BEACH BLVD.  
SUITE 103  
BOYNTON BEACH, FL 33436 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:** EDUARDO T CADIZ JR

02/23/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name CADIZ JR, EDUARDO T  
Address 3925 BOYNTON BEACH BLVD  
SUITE 103  
City-State-Zip: BOYNTON BEACH FL 33436

Title DIRECTOR  
Name CADIZ, MARIA BERNARDITA C  
Address 3925 BOYNTON BEACH BLVD  
SUITE 103  
City-State-Zip: BOYNTON BEACH FL 33436

Title DIRECTOR  
Name CADIZ, EMILIA MARIA C  
Address 3925 BOYNTON BEACH BLVD.  
SUITE 103  
City-State-Zip: BOYNTON BEACH FL 33436

*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:** EDUARDO T CADIZ JR

**DIRECTOR**

02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date