## 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000016707

Entity Name: FAMILY CARE REHAB GROUP CORP.

**Current Principal Place of Business:** 

3663 SW 8 ST SUITE 214 MIAMI, FL 33135

**Current Mailing Address:** 

3663 SW 8 ST SUITE 214 MIAMI, FL 33135

FEI Number: 80-0552625 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALMAGUER, MANUEL F 3663 SW 8 ST SUITE 214 MIAMI, FL 33135 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: MANUEL F ALMAGUER 02/05/2021

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT

Name ALMAGUER, MANUEL F Address 3663 SW 8 ST. SUITE 214

City-State-Zip: MIAMI FL 33135

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: MANUEL ALMAGUER

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/05/2021

FILED Feb 05, 2021

**Secretary of State** 

0327191937CC

Date

Date