

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000083444

Entity Name: DIGITAL HEALTHCARE, INC.

Current Principal Place of Business:

350 W. VENICE AVE, #204
VENICE, FL 34284

Current Mailing Address:

1532 US 41 BY PASS #236
VENICE, FL 34293

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PETERSON, PAMELA
350 W. VENICE AVE. #204
VENICE, FL 34284 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 D
Name PETERSON, PAMELA
Address 350 W. VENICE AVE. #204
City-State-Zip: VENICE FL 34284

Title D
Name LAWLOR, PATRICK
Address 350 W. VENICE AVE. #204
City-State-Zip: VENICE FL 34284

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: PAMELA PETERSON

CEO

03/26/2014

Electronic Signature of Signing Officer/Director Detail

Date