

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000010767

**Entity Name:** HEALTH TECH TRAINING INSTITUTE INC.

**Current Principal Place of Business:**

7080 SW 23RD ST  
206  
MIAMI, FL 33155

**Current Mailing Address:**

7080 SW 23RD ST  
206  
MIAMI, FL 33155 US

**FEI Number:** 27-4726050

**Certificate of Status Desired:** No

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

DORTA, JOSE O  
7080 SW 23RD ST  
206  
MIAMI, FL 33155 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 DORTA, JOSE O  
Address 7080 SW 23RD ST  
206  
City-State-Zip: MIAMI FL 33155

Title D  
Name DORTA, JOSE C.  
Address 1510 INDIAN WAY  
City-State-Zip: CUMMING GA 30040

*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:** JOSE O DORTA

**PRESIDENT**

**01/24/2023**

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

\_\_\_\_\_  
Date