

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000044956

**Entity Name:** LMH HAWTHORNE HEALTHCARE INC.

**Current Principal Place of Business:**

2670 SW 76TH AVENUE  
MIAMI, FL 33155

**Current Mailing Address:**

4075 HAWTHORNE CIRCLE  
LONGMONT, CO 80503

**FEI Number: 45-2181421**

**Certificate of Status Desired: Yes**

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

ALAN, FOXMAN ESQ  
355 NE 5TH AVE  
SUITE 4  
DELRAY BEACH, FL 33483 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	CEO, PRESIDENT	Title	CFO, COO
Name	HERNANDEZ, LOUIS J	Name	SANCHEZ, HARRY J
Address	4075 HAWTHORNE CIRCLE	Address	7204 MATTHEW MILLS RD
City-State-Zip:	LONGMONT CO 80503	City-State-Zip:	MCLEAN VA 22101

*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: LOUIS HERNANDEZ**

**CEO**

**01/07/2019**

Electronic Signature of Signing Officer/Director Detail

Date