## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000076231

**Entity Name: SUNFLOWER CARE CENTER INC** 

**Current Principal Place of Business:** 

6020 NW 72ND CT PARKLAND, FL 33067

**Current Mailing Address:** 

10250 NW 48TH CT

CORAL SPRINGS. FL 33076 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEISS, MARTIN 2061 SW 90TH AVE #D DAVIE, FL 33324 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

FILED Apr 15, 2016

**Secretary of State** 

CC5117393804

Officer/Director Detail:

Title P Title VP

Name SHAHID, KAMAL Name KAMAL, MEHJABIN

Address 10250 NW 48TH CT Address 10250 NW 48TH CT

City-State-Zip: CORAL SPRINGS FL 33076 City-State-Zip: CORAL SPRINGS FL 33076

Title M

Name KAMAL, IMRAN

Address 10250 NW 48TH CT

City-State-Zip: CORAL SPRINGS FL 33076

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: IMRAN KAMAL MANAGER 04/15/2016