| COLON SUAREZ, RAFAEL<br>5421 SW 163RD CT<br>MIAMI, FL 33185 US |   |                                 |   |             |  |
|--|---|---------------------------------|---|-------------|--|
| The above name   | ed entity submits this statement for the purpose of chang | ing its registered office or re | gistered agent, or both, in the State o | of Florida. |  |
| SIGNATUR   | IGNATURE: RAFAEL COLON SUAREZ                             |                                 |   | 06/29/2021  |  |
|  | Electronic Signature of Registered Agent                  |                                 |   | Date        |  |
| Officer/Dire   | ector Detail :  |                                 |   |             |  |
| Title  | Ρ   | Title                           | VP                                      |             |  |
| Name   | COLON SUAREZ, RAFAEL                                      | Name                            | GOYA, YANISETT                          |             |  |
| Address  | 5421 SW 163RD CT  | Address                         | 5421 SW 163RD CT                        |             |  |

City-State-Zip: MIAMI FL 33185

5421 SW 163RD CT MIAMI, FL 33185

### **Current Mailing Address:**

DOCUMENT# P13000077216

**Current Principal Place of Business:** 

5421 SW 163RD CT MIAMI, FL 33185 US

## FEI Number: 46-3694591

## Name and Address of Current Registered Agent:

| 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: RAFAEL COLON SUAREZ

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

06/29/2021 Date

# 2021 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

Entity Name: RALPH PHYSICIAN SERVICES, CORP.

City-State-Zip: MIAMI FL 33185

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