

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000046855

Entity Name: COMMUNITY HEALTH SERVICES, INC.

Current Principal Place of Business:

5190 NW 167TH STREET
SUITE 108
MIAMI, FL 33014

Current Mailing Address:

5190 NW 167TH STREET
SUITE 108
MIAMI, FL 33014

FEI Number: 35-2509128

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSA, CHAMILE
5190 NW 167TH STREET
SUITE 108
MIAMI, FL 33014 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 ROSA, CHAMILE
Address 5190 NW 167TH STREET, SUITE 108
City-State-Zip: MIAMI FL 33014

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: CHAMILE ROSA

PRESIDENT

04/29/2015

Electronic Signature of Signing Officer/Director Detail

Date