

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000092568

Entity Name: HEALTH SOLUTIONS ONE INC

Current Principal Place of Business:

4300 N UNIVERSITY DR
E207
FORT LAUDERDALE, FL 33351

Current Mailing Address:

4300 N UNIVERSITY DR
E207
FORTLAUDERDALE, FL 33351 US

FEI Number: 47-2335397

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CALLEJAS, MARIO A JR
3101 S OCEAN DR
#1103
HOLLYWOOD, FL 33019 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: MARIO CALLEJAS

04/26/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | | | |
|-----------------|----------------------------|-----------------|--------------------------|
| Title | VP | Title | P |
| Name | CHARLES, JOCELYN | Name | CALLEJAS, MARIO |
| Address | 2681 N FLAMINGO RD S507 | Address | 3101 S OCEAN DR #1103 |
| City-State-Zip: | SUNRISE FL 33323 | City-State-Zip: | HOLLYWOOD FL 33019 |

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: MARIO CALLEJAS

PRESIDENT

04/26/2018

Electronic Signature of Signing Officer/Director Detail

Date