

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000004268

**Entity Name:** BIANCHI RESIDENTIAL HEALTHCARE CONSULTANTS, INC.

**FILED**  
**Apr 16, 2018**  
**Secretary of State**  
**CC9435934991**

**Current Principal Place of Business:**

222 N SEPULVEDA BLVD  
#1001  
EL SEGUNDO, CA 90036

**Current Mailing Address:**

222 N SEPULVEDA BLVD  
EL SEGUNDO, CA 90036 US

**FEI Number: 47-2843582**

**Certificate of Status Desired: No**

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

BUSINESS FILINGS INCORPORATED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, 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: MARK WILLIAMS**

**04/16/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name TOH, HUNG ERN  
Address 222 N SEPULVEDA BLVD SUITE 2000,  
OFFICE 52  
City-State-Zip: EL SEGUNDO CA 90036

Title PRESIDENT  
Name SHAO, JIANG  
Address 222 N SEPULVEDA BLVD SUITE 2000,  
OFFICE 52  
City-State-Zip: EL SEGUNDO CA 90036

Title SECRETARY  
Name TOH, HUNG ERN  
Address 222 N SEPULVEDA BLVD SUITE 2000,  
OFFICE 52  
City-State-Zip: EL SEGUNDO CA 90036

Title TREASURER  
Name TOH, HUNG ERN  
Address 222 N SEPULVEDA BLVD SUITE 2000,  
OFFICE 52  
City-State-Zip: EL SEGUNDO CA 90245

*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: JIANG SHAO**

**PRESIDENT**

**04/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date