2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2016
Secretary of State
CC8854174029

DOCUMENT# P15000023964

Entity Name: FAMILY HEALTH CARE CORP

Current Principal Place of Business:

1840 W 49TH ST
518
HIALEAH, FL 33012

Current Mailing Address:

1840 W 49TH ST
518
HIALEAH, FL 33012

FEI Number: 56-2385847

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARDO, PAOLA
2226 SW 58TH CT
MIAMI, FL 33155 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	Title	VP
Name	PARDO, PAOLA	Name	SERRANO, TEOFILO
Address	1840 W 49TH ST SUITE 726	Address	17190 SW 85TH AVE
City-State-Zip:	HIALEAH FL 33012	City-State-Zip:	MIAMI FL 33157
Title	P	Title	M
Name	CORREDOR, BERTHA	Name	SERRANO, CLARA
Address	17190 SW 85TH AVE	Address	2226 SW 58TH CT
City-State-Zip:	MIAMI FL 33157	City-State-Zip:	MIAMI FL 33155

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: PAOLA PARDO PRESIDENT 03/14/2016

Electronic Signature of Signing Officer/Director Detail — Date