

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000026960

Entity Name: ANGELIC CARE INC.

Current Principal Place of Business:

196 IRWIN ST
SAFETY HARBOR, FL 34695

Current Mailing Address:

196 IRWIN ST
SAFETY HARBOR, FL 34695

FEI Number: 47-3504745

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VALLES, DAPHNEE
196 IRWIN ST
SAFETY HARBOR, FL 34695 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 VALLES, DAPHNEE
Address 196 IRWIN ST
City-State-Zip: SAFETY HARBOR FL 34695

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: DAPHNEE VALLES

PRESIDENT

03/29/2016

Electronic Signature of Signing Officer/Director Detail

Date