

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000034305

Entity Name: INTEGRATED SLEEP CARE INC.

Current Principal Place of Business:

14601 SW 29TH
109
MIRAMAR, FL 33027

Current Mailing Address:

14601 SW 29TH
109
MIRAMAR, FL 33027 US

FEI Number: 47-3721460

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMIREZ, JOSE F
14601 SW 29TH
109
MIRAMAR, FL 33027 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 DR
Name RAMIREZ, JOSE F
Address 14601 SW 29TH
109
City-State-Zip: MIRAMAR FL 33027

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: JOSE RAMIREZ

PRESIDENT

01/14/2017

Electronic Signature of Signing Officer/Director Detail

Date