

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000073295

Entity Name: ARISE HEALTHCARE NURSE REGISTRY, INC

Current Principal Place of Business:

2701 W OAKLAND PARK BLVD, STE 225 D
OAKLAND PARK, FL 33311

Current Mailing Address:

2701 W OAKLAND PARK BLVD, STE 225 D
OAKLAND PARK, FL 33311 US

FEI Number: 47-5004623

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

IRVING, JOHN N
2701 W OAKLAND PARK BLVD, STE 225 D
OAKLAND PARK, FL 33311 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 PD
Name IRVING, JOHN N
Address 2701 W OAKLAND PARK BLVD, STE
225 D
City-State-Zip: OAKLAND PARK FL 33311

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: JOHN IRVING

PD

02/10/2017

Electronic Signature of Signing Officer/Director Detail

Date