

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000004077

Entity Name: AT HOME PHLEBOTOMY INC

Current Principal Place of Business:

3578 TRIPOLI BLVD
PUNTA GORDA, FL 33950

Current Mailing Address:

3578 TRIPOLI BLVD
PUNTA GORDA, FL 33950

FEI Number: 81-1141673

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMOUR, JOHN C
3578 TRIPOLI BLVD
PUNTA GORDA, FL 33950 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 PST
Name LAMOUR, JOHN C
Address 3578 TRIPOLI BLVD.
City-State-Zip: PUNTA GORDA FL 33950

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 LAMOUR

PRESIDENT

03/21/2017

Electronic Signature of Signing Officer/Director Detail

Date