

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000031953

Entity Name: MELISSA SQUADRITO, ARNP, CNM PA**Current Principal Place of Business:**6131 SW 158TH WAY
DAVIE, FL 33331**Current Mailing Address:**6131 SW 158TH WAY
DAVIE, FL 33331 US**FEI Number: 81-2208862****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TELLER-SQUADRITO, MELISSA
6131 SW 158TH WAY
DAVIE, FL 33331 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	DIRECTOR
Name	TELLER-SQUADRITO, MELISSA
Address	6131 SW 158TH WAY
City-State-Zip:	DAVIE FL 33331

Title	PRESIDENT, TREASURER, SECRETARY
Name	SQUADRITO, MELISSA
Address	6131 SW 158TH WAY
City-State-Zip:	DAVIE FL 33331

Title	PRESIDENT, TREASURER, SECRETARY
Name	SQUADRITO, MELISSA
Address	6131 SW 158TH WAY
City-State-Zip:	DAVIE FL 33331

Title	PRESIDENT, TREASURER, SECRETARY
Name	SQUADRITO, MELISSA
Address	6131 SW 158TH WAY
City-State-Zip:	DAVIE FL 33331

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: MELISSA TELLER-SQUADRITO**PRESIDENT****05/01/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date