

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000051218

Entity Name: 360 HEALTHCARE SOLUTIONS, INC.

Current Principal Place of Business:

1616 SANDPIPER CIRCLE
WESTON, FL 33327

Current Mailing Address:

1616 SANDPIPER CIRCLE
WESTON, FL 33327 US

FEI Number: 81-3238885

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PASCUAL, AMARYLLIS
1616 SANDPIPER CIRCLE
WESTON, FL 33327 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 PASCUAL, AMARYLLIS
Address 1616 SANDPIPER CIRCLE
City-State-Zip: WESTON FL 33327

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: AMARYLLIS PASCUAL

P

06/30/2020

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date