

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000039031

**Entity Name:** HCA INNOVATION SERVICE CORP

**Current Principal Place of Business:**

500 THREE ISLANDS BLVD #120A  
HALLANDALE, FL 33309

**Current Mailing Address:**

500 THREE ISLANDS BLVD #120A  
HALLANDALE, FL 33309 US

**FEI Number:** 82-1422693

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CARDONA, HERNAN  
500 THREE ISLANDS BLVD #120A  
HALLANDALE, FL 33309 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	Title	VP
Name	CARDONA, HERNAN	Name	LOPEZ, ALBA N
Address	500 THREE ISLANDS BLVD #120A	Address	500 THREE ISLANDS BLVD #120A
City-State-Zip:	HALLANDALE FL 33309	City-State-Zip:	HALLANDALE FL 33309

*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:** HERNAN CARDONA

P

04/30/2018

Electronic Signature of Signing Officer/Director Detail

Date