

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000078621

**Entity Name:** ASZ CARING HEARTS, INC.

**Current Principal Place of Business:**

2800 W OAKLANDPARK BLVD  
SUITE 305-B  
OAKLAND PARK, FL 33311

**Current Mailing Address:**

2800 W OAKLANDPARK BLVD  
SUITE 305-B  
OAKLAND PARK, FL 33311 US

**FEI Number:** 83-2848736

**Certificate of Status Desired:** No

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

ADAMS, KAYLON  
2800 W OAKLAND PARK BLVD  
SUITE 305-B  
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            P  
Name            ADAMS, KAYLON  
Address        1400 VILLAGE BLVD  
                  UNIT 1120  
City-State-Zip: WEST PALM BEACH FL 33409

Title            VP  
Name            GRAY, JHONNARRI  
Address        750 SOUTH ORANGE BLOSSOM  
                  TRAIL  
                  SUITE 239  
City-State-Zip: ORLANDO FL 32805

*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:** KAYLON ADAMS

**PRESIDENT**

**05/01/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date