

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000008429

Entity Name: SPIRITTO MEDCARE INC

Current Principal Place of Business:

10700 CITY CENTER BLVD
5248
PEMBROKE PINES, FL 33025

Current Mailing Address:

10700 CITY CENTER BLVD
5248
PEMBROKE PINES, FL 33025

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIRITTO, RICARDO
10700 CITY CENTER BLVD
5248
PEMBROKE PINES, FL 33025 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 SPIRITTO, RICARDO
Address 10700 CITY CENTER BLVD #5248
City-State-Zip: MIAMI FL 33027

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: RICARDO SPIRITTO

PRESIDENT

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date