

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000094437

Entity Name: ASCENT CARE SOLUTIONS, INC.

Current Principal Place of Business:

4707 WEST GANDY BLVD
UNIT 10 SUITE B TAMPA
RIVERVIEW, FL 33611

Current Mailing Address:

6206 GONDOLA DR
RIVERVIEW, FL 33578

FEI Number: 83-2574351

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANGELES, HERNANI
6206 GONDOLA DR
RIVERVIEW, FL 33578 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 D
Name ANGELES, HERNANI
Address 6206 GONDOLA DR
City-State-Zip: RIVERVIEW FL 33578

Title D
Name LOPEZ, MINNIE
Address 6080 DENVER ST N
City-State-Zip: ST PETERSBURG FL 33703

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: HERNANI ANGELES

CEO/ADMINISTRATOR

03/19/2019

Electronic Signature of Signing Officer/Director Detail

Date