

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000098759

**Entity Name:** ALLHEALTHGO, INC.

**Current Principal Place of Business:**

3401 S. CONGRESS AVENUE  
BOYNTON BEACH, FL 33426

**FILED**  
**Mar 06, 2023**  
**Secretary of State**  
**9216165702CC**

**Current Mailing Address:**

3401 S. CONGRESS AVENUE  
BOYNTON BEACH, FL 33426 US

**FEI Number: 83-3321687**

**Certificate of Status Desired: No**

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

NASON, YEAGER, GERSON, HARRIS & FUMERO, P.A  
3001 PGA BOULEVARD  
SUITE 305  
PALM BEACH GARDENS, FL 33410 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 DIRECTOR  
Name KESSLER, MICHELE  
Address 3401 S. CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR  
Name SILVERS, LAURIE  
Address 3401 S. CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR  
Name BERMONT, PETER L  
Address 3401 S. CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title CFO  
Name OLMO, PAMELA  
Address 3401 S. CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR  
Name ROBINSON, HANDEL R  
Address 3401 S. CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR  
Name YATES, ESSIE  
Address 3401 S. CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR  
Name ZINNER, MICHAEL J  
Address 3401 S. CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title CEO  
Name SUKHDEO, DOLORES  
Address 3401 S. CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

*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: PAMELA OLMO**

**CFO**

**03/06/2023**

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

\_\_\_\_\_  
Date