

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000009968

Entity Name: ALLEGIANT ASSISTANT HOMECARE INC.

Current Principal Place of Business:

121 DOGWOOD DRIVE LOOP
OCALA, FL 34472

Current Mailing Address:

121 DOGWOOD DRIVE LOOP
OCALA, FL 34472

FEI Number: 84-1822331

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, NAKIA L
121 DOGWOOD DRIVE LOOP
OCALA, FL 34472 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 CEO
Name SMITH, NAKIA L
Address 121 DOGWOOD DRIVE LOOP
City-State-Zip: Ocala FL 34472

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: NAKIA SMITH

CEO

05/08/2020

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date