

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000084741

**Entity Name:** ODYSSEY HEALTH GROUP INCORPORATED

**Current Principal Place of Business:**

333 SE 2ND AVENUE  
SUITE 2000  
MIAMI, FL 33131

**Current Mailing Address:**

333 SE 2ND AVENUE  
SUITE 2000  
MIAMI, FL 33131 US

**FEI Number:** 47-5004691

**Certificate of Status Desired:** No

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

CROSS, ASHLEY  
333 SE 2ND AVENUE  
SUITE 2000  
MIAMI, FL 33131 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 CROSS, ASHLEY N  
Address 333 SE 2ND AVENUE  
City-State-Zip: MIAMI FL 33131

*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:** ASHLEY CROSS

CEO

09/23/2021

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

\_\_\_\_\_  
Date