

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000012646

Entity Name: WHEEL MEDICAL, P.A.

Current Principal Place of Business:

2151 S. LAMAR BLVD
AUSTIN, TX 78704

Current Mailing Address:

2151 S. LAMAR BLVD
AUSTIN, TX 78704 US

FEI Number: 84-4955733

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN STREET
SUITE 4
TALLAHASSEE, FL 32301 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 FADUL, RAFID M.D.
Address 2220 SUPERIOR VIADUCT, APT 11
City-State-Zip: CLEVELAND OH 44113

Title S
Name FADUL, RAFID M.D.
Address 2220 SUPERIOR VIADUCT, APT 11
City-State-Zip: CLEVELAND OH 44113

Title T
Name FADUL, RAFID M.D.
Address 2220 SUPERIOR VIADUCT, APT 11
City-State-Zip: CLEVELAND OH 44113

Title D
Name FADUL, RAFID M.D.
Address 2220 SUPERIOR VIADUCT, APT 11
City-State-Zip: CLEVELAND OH 44113

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: RAFID FADUL

PRESIDENT

04/29/2021

Electronic Signature of Signing Officer/Director Detail

Date