

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000034850

Entity Name: CREDIBLE HOMECARE SERVICES INC

Current Principal Place of Business:

12627 SAN JOSE BLVD
SUITE 504E
JACKSONVILLE, FL 32223

Current Mailing Address:

12627 SAN JOSE BLVD
SUITE 504E
JACKSONVILLE, FL 32223 US

FEI Number: 85-1059905

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEGALCORP SOLUTIONS, LLC
3440 W HOLLYWOOD BLVD. SUITE 415
HOLLYWOOD, FL 33021 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 ALEXIS, ANTONINE
Address 12627 SAN JOSE BLVD, SUITE 504E
City-State-Zip: JACSONVILLE FL 32223

Title TRE
Name MARTIN, SOPHONISE
Address 12627 SAN JOSE BLVD, SUITE 504E
City-State-Zip: JACSONVILLE FL 32223

Title SEC
Name JOINVIL, FRANCOISE
Address 12627 SAN JOSE BLVD, SUITE 504E
City-State-Zip: JACSONVILLE FL 32223

Title VP
Name JOINVIL, FRANCOISE
Address 12627 SAN JOSE BLVD, SUITE 504E
City-State-Zip: JACSONVILLE FL 32223

Title DIR
Name ALEXIS, ANTONINE
Address 12627 SAN JOSE BLVD, SUITE 504E
City-State-Zip: JACSONVILLE FL 32223

Title DIR
Name MARTIN, SOPHONISE
Address 12627 SAN JOSE BLVD, SUITE 504E
City-State-Zip: JACSONVILLE FL 32223

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: FRANCOISE JOINVIL

SEC

03/15/2021

Electronic Signature of Signing Officer/Director Detail

Date