

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000040149

Entity Name: JOY FAMILY MEDICINE & REGENERATIVE CARE INC

Current Principal Place of Business:

10600 GRIFFIN ROAD # 103
COOPER CITY, FL 33330

Current Mailing Address:

10600 GRIFFIN ROAD # 103
COOPER CITY, FL 33330 US

FEI Number: 85-1355116

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANTHONY, JOEY
15054 SW 34 TH STREET
SUITE 101
DAVIE, FL 33331 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 ANTHONY, JOEY
Address 15054 SW 34 TH STREET
City-State-Zip: DAVIE FL 33331

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: ANTHONY , JOEY

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04/28/2022

Electronic Signature of Signing Officer/Director Detail

Date