

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000052422

Entity Name: MEDISANA HEALTH CENTER CORP

Current Principal Place of Business:

5391 NW 36 ST
MIAMI SPRINGS, FL 33166

Current Mailing Address:

5391 NW 36 ST
MIAMI SPRINGS, FL 33166 US

FEI Number: 85-2037719

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOTO, GLEIDYS
5391 NW 36 ST
MIAMI SPRINGS, FL 33166 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 SOTO, GLEIDYS
Address 5391 NW 36 ST
City-State-Zip: MIAMI SPRINGS FL 33166

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: GLEIDYS SOTO ALONSO

P

04/28/2022

Electronic Signature of Signing Officer/Director Detail

Date