

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000060846

**Entity Name:** 5 STAR MEDICAL CONSULTING CORP

**Current Principal Place of Business:**

4917 SR 54

NEW PORT RICHEY, FL 34653

**Current Mailing Address:**

4917 SR 54

NEW PORT RICHEY, FL 34653 US

**FEI Number:** 80-3035396

**Certificate of Status Desired:** No

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

RAMOS, JOSE S

2344 CRESTOVER LANE

WESLEY CHAPEL, FL 33544 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 EDMOND, JIMMY

Address 4917 SR 54

City-State-Zip: NEW PORT RICHEY FL 34653

*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:** JIMMY EDMOND

**PRESIDENT**

**01/10/2022**

Electronic Signature of Signing Officer/Director Detail

Date