## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000083638

Entity Name: MARITZA HEALTH SERVICES CORP

**Current Principal Place of Business:** 

3580 NE 5TH ST APT 106

HOMESTEAD, FL 33033

## **Current Mailing Address:**

3580 NE 5TH ST APT 106 HOMESTEAD, FL 33033 US

FEI Number: 85-3657345 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ARANGO , MARITZA 3580 NE 5TH ST APT 106 HOMESTEAD, FL 33033 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: MARITZA ARANGO 02/23/2025

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title F

Name ARANGO , MARITZA Address 3580 NE 5TH ST

**APT 106** 

City-State-Zip: HOMESTEAD FL 33033

SIGNATURE: MARITZA ARANGO

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.

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Electronic Signature of Signing Officer/Director Detail

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FILED Feb 23, 2025

**Secretary of State** 

6374126578CC

Date

02/23/2025