## **2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000089663

Entity Name: QUALITY VIP CARE INC.

**Current Principal Place of Business:** 

5050 NW 7 ST 304

MIAMI, FL 33126

## **Current Mailing Address:**

5050 NW 7 ST 304

MIAMI, FL 33126

FEI Number: 85-4083238 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MORALES, ILIANA LEONOR 5050 NW 7 ST 304

MIAMI, FL 33126 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

FILED Jan 25, 2023

**Secretary of State** 

1394832045CC

## Officer/Director Detail:

Title F

Name MORALES, ILIANA LEONOR
Address 5050 NW 7 ST APT 304
City-State-Zip: MIAMI FL 33126

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.