

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000102724

**Entity Name:** VELASCO HEALTHCARE CONSULTING CORP

**Current Principal Place of Business:**

1836 SOUTHERN OAK LOOP  
MINNEOLA, FL 34715

**Current Mailing Address:**

1836 SOUTHERN OAK LOOP  
MINNEOLA, FL 34715

**FEI Number:** 87-3918265

**Certificate of Status Desired:** No

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

VELASCO, ANGELA L  
1836 SOUTHERN OAK LOOP  
MINNEOLA, FL 34715 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 VELASCO, ANGELA L  
Address 1836 SOUTHERN OAK LOOP  
City-State-Zip: MINNEOLA FL 34715

*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:** ANGELA L VELASCO

**PRESIDENT**

**04/22/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date