

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000053006

Entity Name: ALTERNATIVE MEDICAL HEALTHCARE SERVICES III INC

Current Principal Place of Business:

10570 S. FEDERAL HWY 1
PORT ST LUCIE, FL 34952

Current Mailing Address:

7069 SW 47 ST
MIAMI, FL 33155 US

FEI Number: 88-3156640

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EXPERT CARES OF FLORIDA LLC
7071 SW 47TH ST
MIAMI, FL 33155 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 EXPERT CARES OF FLORIDA LLC
Address 7071 SW 47TH ST
City-State-Zip: MIAMI FL 33155

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: FAUSTINO FERNANDEZ

CO-OWNER

02/06/2023

Electronic Signature of Signing Officer/Director Detail

Date