

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000028315

**Entity Name:** PRENDES HEALTH SERVICES, INC

**Current Principal Place of Business:**

108 NE 7TH AVE  
105  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

108 NE 7TH AVE  
105  
BOYTON BEACH, FL 33435

**FEI Number:** 92-3493672

**Certificate of Status Desired:** No

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

PRENDES ORTEGA, LILIANA  
108 NE 7TH AVE  
105  
BOYNTON BEACH, FL 33435 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            OWNER  
Name            PRENDES ORTEGA, LILIANA  
Address        108 NE 7TH AVE, #105  
City-State-Zip: BOYNTON BEACH FL 33435

*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:** LILIANA PRENDES ORTEGA

**OWNER**

**02/10/2024**

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

\_\_\_\_\_  
Date