

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000085300

Entity Name: GENTLE HANDS HEALTH CARE SERVICES, CORP.

Current Principal Place of Business:

9415 SW 72 ST
SUITE 288
MIAMI, FL 33173

Current Mailing Address:

9415 SW 72 ST
SUITE 288
MIAMI, FL 33173 US

FEI Number: 65-0452728

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ, JIMMY
9415 SW 72 ST
SUITE 288
MIAMI, FL 33173 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 PSD
Name DIAZ, JIMMY
Address 9415 SW 72 ST
SUITE 288
City-State-Zip: MIAMI FL 33173

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: JIMMY DIAZ

PSD

04/16/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date