

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000019066

Entity Name: HEALTH FORMS & SYSTEMS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

5135 KENSINGTON CIRCLE
CORAL SPRINGS, FL 33076

Current Mailing Address:

5135 KENSINGTON CIRCLE
CORAL SPRINGS, FL 33076

FEI Number: 65-0553477

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUBROW DUKER & ASSOCIATES, P.A.
5401 N. UNIVERSITY DRIVE
SUITE 204
CORAL SPRINGS, FL 33067 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: STEVEN D. DUKER

04/19/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DPS
Name SOLOMON, RONALD S
Address 5135 KENSINGTON CIRCLE
City-State-Zip: CORAL SPRINGS FL 33076

Title DVPT
Name SOLOMON, CHERYL
Address 5135 KENSINGTON CIRCLE
City-State-Zip: CORAL SPRINGS FL 33076

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: RONALD SOLOMON

PRESIDENT

04/19/2017

Electronic Signature of Signing Officer/Director Detail

Date