## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000093003

Entity Name: EDGEMED HEALTHCARE SOLUTIONS INC.

**Current Principal Place of Business:** 

4800 T-REX AVENUE SUITE 200 BOCA RATON, FL 33431

**Current Mailing Address:** 

4800 T-REX AVENUE SUITE 200 BOCA RATON. FL 33431 US

FEI Number: 65-0820431 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KURSTIN, RYAN 4800 T-REX AVENUE, SUITE 200 BOCA RATON, FL 33431 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

**FILED** Feb 11, 2019

**Secretary of State** 

1233760312CC

Officer/Director Detail:

Title Title ST

KURSTIN, RYAN KURSTIN, SCOTT COO Name Name Address 4800 TREX AVENUE Address 4800 TREX AVENUE SUITE 200

SUITE 200

City-State-Zip: BOCA RATON FL 33431 City-State-Zip: BOCA RATON FL 33431

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: SCOTT KURSTIN

VICE PRESIDENT

02/11/2019