

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000106720

**Entity Name:** AGUILERA AND ASSOCIATES HEALTHCARE CONSULTANTS  
INC.

**FILED**  
**Apr 02, 2015**  
**Secretary of State**  
**CC3774327643**

**Current Principal Place of Business:**

151 CRANDON BOULEVARD, #442  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

151 CRANDON BOULEVARD, #442  
KEY BISCAYNE, FL 33149

**FEI Number: 58-2516203**

**Certificate of Status Desired: No**

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

AGUILERA, LOURDES M  
151 CRANDON BOULEVARD, #442  
KEY BISCAYNE, FL 33149 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 AGUILERA, LOURDES  
Address 151 CRANDON BLVD #442  
City-State-Zip: KEY BISCAYNE FL 33149

*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: LOURDES AGUILERA**

**PRESIDENT**

**04/02/2015**

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

\_\_\_\_\_  
Date