

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000081205

Entity Name: ANA HEALTH CARE SERVICES, LLC

Current Principal Place of Business:

2630 W 76 ST
206
HIALEAH, FL 33016

Current Mailing Address:

2630 W 76 ST
206
HIALEAH, FL 33016

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUINTANA PINO, ANABEL
2630 W 76 ST
206
HIALEAH, FL 33016 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

Authorized Person(s) Detail :

Title MGR
Name QUINTANA PINO, ANABEL
Address 2630 W 76 ST APT 206
City-State-Zip: HIALEAH FL 33016

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANABEL QUINTANA PINO

04/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date