2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000001615

Entity Name: MHP SALUD, INC.

Current Principal Place of Business:

2111 GOLFSIDE DRIVE SUITE 2B YPSILANTI, MI 48197

Current Mailing Address:

7521 PAULA DRIVE #263097 TAMPA, FL 33685 US

FEI Number: 38-3092194

Name and Address of Current Registered Agent:

ALGUILA, PATRIA 3100 OLD WINTER GARDEN ROAD APT 326 OCOEE, FL 34761 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.

The above named	entity submits this statement for the purpose of changing its	registered office or regis	tered agent, or both, in the State of Flo	rida.			
SIGNATURE	: PATRIA ALGUILA			04/23/2019			
	Electronic Signature of Registered Agent			Date			
Officer/Director Detail :							
Title	PRESIDENT	Title	SECRETARY				
Name	PHILLIPS MARTINEZ, AMANDA	Name	LAWN-DAY, GAYLE				
Address	1026 S. MCDONOUGH ST	Address	5220 W. AGATE STREET				
City-State-Zip:	DECATUR GA 30030	City-State-Zip:	PASCO WA 78552				
	AT LARGE, BOARD AFFAIRS COMMITTEE	Title	VICE PRESIDENT				
		Name	VINEYARD, JONATHON				
Name	MEYER, CHRIS	Address	1240 MATENGO CIRCLE				
Address	2301 S WALLONNIE DRIVE	City-State-Zip:	ST. JOHNS FL 32259				
City-State-Zip:	MARSHFIELD WI 54448						
Title	FINANCE COMMITTEE	Title	BOARD AFFAIRS COMMITTEE				
Name	SALINAS, JOSE P.	Name	PADILLA, CRISTINA				
Address	1811 OTTAWA ROAD	Address	1609 COOLIDGE STREET				
	GENOA OH 43430	City-State-Zip:	SAN DIEGO CA 92111				
City-State-Zip:	GENOA OH 43430	Title	FINANCE COMMITTEE				
Title	BOARD AFFAIRS	Name	VINEYARD, DAVID				
Name	RICHARD, JAMES R	Address	24201 EAST GROVELAND ROA	חג			
Address	410 BIRCHARD AVENUE	City-State-Zip:					
City-State-Zip:	FREMONT OH 43420	<i>,</i> ,					
		Continues	Continues on page 2				

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

CEO

SIGNATURE: GAYLE LAWN-DAY

Electronic Signature of Signing Officer/Director Detail

FILED Apr 23, 2019 Secretary of State 7349094777CC

Certificate of Status Desired: No

Date

04/23/2019

Officer/Director Detail Continued :

Title	TREASURER, FINANCE COMMITTEE	Title	FINANCE COMMITTEE	
Name	KETTERLINUS, JACK	Name	PINERO CARRASQUILLO, BRENDA	
Address	5100 W. FRANKLIN STREET	Adduces	IVELISSE 3102 HAINE DRIVE APT 422	
City-State-Zip:	RICHMOND VA 23226	Address		
		City-State-Zip:	HARLINGEN TX 78550	