

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000001827

Entity Name: SOVEREIGN HEALTH OF FLORIDA, INC.

Current Principal Place of Business:

1201 PUERTA DEL SOL STE 222
SAN CLEMENTE, CA 92673

Current Mailing Address:

PO BOX 5705
SAN CLEMENTE, CA 92673 US

FEI Number: 20-2585469

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 PRESIDENT, TREASURER,
 SECRETARY, DIRECTOR
Name BARKATAKI, RISHI
Address SUITE 200-C 2055 LIMESTONE RD
City-State-Zip: WILMINGTON, DE 19808

Title PRESIDENT, DIRECTOR
Name SHARMA, TONMOY
Address SUITE 200 1201 PUERTA DEL SOL
City-State-Zip: SAN CLEMENTE CA 92673

Title SECRETARY
Name GOSWAMI, SUBHASH
Address 1201 PUERTA DEL SOL STE 222
City-State-Zip: SAN CLEMENTE CA 92673

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: RISHI BARKATAKI

PRESIDENT

04/22/2019

Electronic Signature of Signing Officer/Director Detail

Date