

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001282

Entity Name: DOCTOR ON DEMAND PROFESSIONALS OF MICHIGAN, P.C.,
P.A.**FILED**
Apr 26, 2019
Secretary of State
3935922305CC**Current Principal Place of Business:**275 BATTERY STREET, #650
SAN FRANCISCO, CA 94111**Current Mailing Address:**275 BATTERY STREET, #650
SAN FRANCISCO, CA 94111 US**FEI Number: 46-4400979****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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, DIRECTOR
Name	TONG, IAN DR.
Address	275 BATTERY STREET, #650
City-State-Zip:	SAN FRANCISCO CA 94111

Title	VP
Name	XIONG, GLEN DR.
Address	275 BATTERY STREET, #650
City-State-Zip:	SAN FRANCISCO CA 94111

Title	SECRETARY, DIRECTOR
Name	DEAN, KRISTIN DR.
Address	275 BATTERY STREET, #650
City-State-Zip:	SAN FRANCISCO CA 94111

Title	DIRECTOR
Name	FARNUM, ELISABETH DR.
Address	275 BATTERY STREET, #650
City-State-Zip:	SAN FRANCISCO CA 94111

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: IAN TONG**PRESIDENT****04/26/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date