2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000000189

Entity Name: QUALCARE, INC.

Current Principal Place of Business:

30 KNIGHTSBRIDGE ROAD PISCATAWAY. NJ 08859

Current Mailing Address:

30 KNIGHTSBRIDGE ROAD PISCATAWAY, NJ 08859 US

FEI Number: 22-3129563 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Mar 03, 2023

Secretary of State

3654805130CC

Officer/Director Detail:

Title DIRECTOR

Name MADEJA, , PETER C.

Address 30 KNIGHTSBRIDGE ROAD

City-State-Zip: PISCATAWAY NJ 08859

Title SECRETARY

Name STEPHANIE, KROON

Address 30 KNIGHTSBRIDGE ROAD

City-State-Zip: PISCATAWAY NJ 08859

Title VP

Name LIHOU, , ALICE

Address 30 KNIGHTSBRIDGE ROAD

City-State-Zip: PISCATAWAY NJ 08859

Title VP

Name SUN, , ALEX

Address 30 KNIGHTSBRIDGE ROAD

City-State-Zip: PISCATAWAY NJ 08859

Title PRESIDENT

Name LYNCH, , ARTHUR

Address 30 KNIGHTSBRIDGE ROAD

City-State-Zip: PISCATAWAY NJ 08859

Title TREASURER

Name BROWN, , NORMAN

Address 30 KNIGHTSBRIDGE ROAD

City-State-Zip: PISCATAWAY NJ 08859

Title VP

Name MADEJA, , PETER C.

Address 30 KNIGHTSBRIDGE ROAD

City-State-Zip: PISCATAWAY NJ 08859

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: STEPHANIE, KROON

SECRETARY

03/03/2023

Electronic Signature of Signing Officer/Director Detail

Date