

**2021 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F20000002020

**Entity Name:** QORE HEALTH INC

**Current Principal Place of Business:**

1395 BRICKELL AVENUE, SUITE 800  
MIAMI, FL 33131

**Current Mailing Address:**

1395 BRICKELL AVENUE, SUITE 800  
MIAMI, FL 33131 US

**FEI Number: 83-2410908**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

ZAMBRANO, DIEGO N  
1395 BRICKELL AVENUE, SUITE 800  
MIAMI, FL 33131 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            DIR/  
Name            ZAMBRANO, DIEGO N  
Address        1395 BRICKELL AVENUE, SUITE 800  
City-State-Zip: MIAMI FL 33131

Title            SECRETARY  
Name            ALVAREZ, MARGARITA ROSA  
Address        11422 SW 74 STREET  
City-State-Zip: MIAMI FL 33173

*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: DIEGO N ZAMBRANO**

**PRESIDENT**

**11/03/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date