## 2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000005170

Entity Name: ANDORHEALTH VENTURES, INC.

**Current Principal Place of Business:** 

4203 VINELAND ROAD STE K6 ORLANDO, FL 32811

**Current Mailing Address:** 

4203 VINELAND ROAD STE K6 ORLANDO, FL 32811 US

FEI Number: 85-0782264 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

**FILED** Jan 29, 2024

**Secretary of State** 

8554591611CC

Officer/Director Detail:

Title DIRP, CEO Title DIR, CFO, TREASURER TOLETI, RAJ Name STREUFERT, SHANE Name

4203 VINELAND RD STE K6 Address 4203 VINELAND RD STE K6 Address

City-State-Zip: ORLANDO FL 32811 ORLANDO FL 32811 City-State-Zip:

VP, FINANCE Title Title DIR, SEC, COO Name ELDER, KRISTEN PATEL, PRITESH Name

4203 VINELAND ROAD STE K6 Address Address 4203 VINELAND RD STE K6

ORLANDO FL 32811 City-State-Zip: City-State-Zip: ORLANDO FL 32811

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: KRISTEN E ELDER

Electronic Signature of Signing Officer/Director Detail

VP, FINANCE

01/29/2024