

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H89541

Entity Name: DIRECT NURSING CARE SERVICES, INC.

Current Principal Place of Business:

9045 LA FONTANA BLVD
SUITE 211
BOCA RATON, FL 33434

Current Mailing Address:

P.O. BOX 812723
BOCA RATON, FL 33481 US

FEI Number: 59-2440238

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SALKEY, ELAINE
9045 LAFONTANA PLAZA - STE. 211
BOCA RATON, FL 33434 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 P
Name SALKEY, ELAINE
Address 9045 LA FONTANA BLVD
SUITE 211
City-State-Zip: BOCA RATON FL 33434

Title ST
Name SALKEY, ELAINE
Address 9045 LAFONTANA BLVD
SUITE 211
City-State-Zip: BOCA RATON FL 33434

Title VP
Name COLLINS, MONIQUE
Address 9045 LA FONTANA BLVD
SUITE 211
City-State-Zip: BOCA RATON FL 33434

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: ELAINE SALKEY

PRSIDENT

06/09/2020

Electronic Signature of Signing Officer/Director Detail

Date