## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L84760

Entity Name: MP TOTALCARE, INC.

**Current Principal Place of Business:** 

1505 LBJ FREEWAY SUITE 600

FARMERS BRANCH, TX 75234

**Current Mailing Address:** 

1505 LBJ FREEWAY SUITE 600

FARMERS BRANCH, TX 75234 US

FEI Number: 59-3018364 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD 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** Apr 15, 2014

**Secretary of State** 

CC2120373188

Officer/Director Detail:

**PRESIDENT** Title Title SECRETARY, VP, DIRECTOR

COHEN, MARTIN Name Name GAFFNEY, SEAN P 1505 LBJ FREEWAY Address Address 1505 LBJ FREEWAY

> SUITE 600 SUITE 600

City-State-Zip: FARMERS BRANCH TX 75234 FARMERS BRANCH TX 75234 City-State-Zip:

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: SEAN P. GAFFNEY

VICE PRESIDENT

04/15/2014