

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000093788

**Entity Name:** ACCESS HEALTH, INC.

**Current Principal Place of Business:**

3860 N. POWERLINE ROAD  
DEERFIELD BEACH, FL 33073

**Current Mailing Address:**

3860 N. POWERLINE ROAD  
DEERFIELD BEACH, FL 33073 US

**FEI Number:** 20-1897740

**Certificate of Status Desired:** No

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

KLEIN, PATRICIA ESQ  
3860 N. POWERLINE ROAD  
DEERFIELD BEACH, FL 33073 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            PRESIDENT  
Name            ALFIERI, MARK  
Address        3860 N. POWERLINE ROAD  
City-State-Zip: DEERFIELD BEACH FL 33073

*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:** MARK ALFIERI

**PRESIDENT**

**04/23/2018**

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

\_\_\_\_\_  
Date