

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109053

Entity Name: COMPLETE HOME HEALTH CARE, INC.

Current Principal Place of Business:

1200 S. FEDERAL HWY., STE. 205
BOYNTON BEACH, FL 33435

Current Mailing Address:

1200 S FEDERAL HWY
SUITE 205
BOYNTON BEACH, FL 33435

FEI Number: 61-1445626

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HABIB, BAHER
7491 RIDGEFIELD LANE
LAKE WORTH, FL 33467 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	Title	T
Name	HABIB, BAHER F	Name	ISHAK, EMAD
Address	7491 RIDGEFEILD LANE	Address	10288 HUNT CLUB LANE
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	PALM BEACH GARDENS FL 33418

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: BAHER HABIB

P

02/27/2019

Electronic Signature of Signing Officer/Director Detail

Date