

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000132139

**Entity Name:** LA ROCHE CARE SERVICES, INC.

**Current Principal Place of Business:**

4047 OKEECHOBEE BLVD  
SUITE 110  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

4047 OKEECHOBEE BLVD  
110  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 42-1564287

**Certificate of Status Desired:** Yes

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

JOHNSON, CARMEN I  
224 CYPRESS TRACE  
ROYAL PALM BEACH, FL 33411 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            D  
Name            JOHNSON, CARMEN I  
Address        4047 OKEECHOBEE BLVD  
                  110  
City-State-Zip: WEST PALM BEACH FL 33409

*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:** CARMEN I JOHNSON

CEO

01/25/2018

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

\_\_\_\_\_ Date