

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000121049

Entity Name: ATTE CLINICAL STAFFING, INC.

Current Principal Place of Business:

5617 NW 7 ST., STE. 205
MIAMI, FL 33126

Current Mailing Address:

5617 NW 7 ST., STE. 205
MIAMI, FL 33126

FEI Number: 86-0004870

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RAMOS, PAUL M
5617 NW 7 STREET, STE 205
MIAMI, FL 33126 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 PD
Name RAMOS, PAUL M
Address 9415 SUNSET DR. #195
City-State-Zip: MIAMI FL 33173

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: PAUL RAMOS

PRESIDENT

01/11/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date