

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098116

Entity Name: ELITE MEDICAL ALLIANCE, INC.

Current Principal Place of Business:

30 W. MASHTA DRIVE
300
MIRAMAR, FL 33149

Current Mailing Address:

P.O. BOX 347273
MIAMI, FL 33234

FEI Number: 20-3259932

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KESHVARI-RASTI, HAMID
30 W. MASHTA DRIVE
300
KEY BISCYNE, FL 33149 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 CHAIRMAN
Name KESHVARI-RASTI, HAMID
Address 11820 MIRAMAR PARKWAY
202
City-State-Zip: MIRAMAR FL 33025

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: HAMID KESHVARI-RASTI

CHAIRMAN

01/26/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date