## 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000131267

Entity Name: CARE PLUS HOME HEALTH AGENCY INC.

**Current Principal Place of Business:** 

160 NW 176 STREET - STE. 411 MIAMI GARDENS. FL 33169

## **Current Mailing Address:**

160 NW 176 STREET - STE. 411 MIAMI GARDENS. FL 33169 US

FEI Number: 59-3829080 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORIN, MARIE M 9010 SUNRISE LAKES BLVD APT 211 SUNRISE, FL 33322 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

FILED Mar 12, 2023

**Secretary of State** 

1051358480CC

Officer/Director Detail:

Title CEO Title DS

Name MORIN, MARIE M Name MORIN, WILFRID

Address 9010 SUNRISE LAKES BLVD Address 9010 SUNRISE LAKES BLVD

APT 211 APT 211

City-State-Zip: SUNRISE FL 33322 City-State-Zip: SUNRISE FL 33322

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.

Electronic Signature of Signing Officer/Director Detail