

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000044568

Entity Name: MAX HEALTH CENTER INC

Current Principal Place of Business:

14225 SW 42 ST
MIAMI, FL 33175

Current Mailing Address:

14225 SW 42 ST
MIAMI, FL 33175

FEI Number: 26-2018696

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VIDAL-ZAS, ALICIA R
14225 S. W 42 ST
MIAMI, FL 33175 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	S
Name	VIDAL-ZAS, ALICIA R	Name	LOMBANA, MELISSA R
Address	14225 SW 42 ST	Address	14225 SW 42 ST
City-State-Zip:	MIAMI FL 33175	City-State-Zip:	MIAMI FL 33175
Title	SECRETARY		
Name	LOMBANA, RYAN F		
Address	14225 SW 42 ST		
City-State-Zip:	MIAMI FL 33175		

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: ALICIA VIDAL-ZAS

PRESIDENT

02/28/2016

Electronic Signature of Signing Officer/Director Detail

Date