

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000086073

Entity Name: ST. SOPHIA NURSING CARE, CORPORATION

Current Principal Place of Business:

702 SW 57 AVE
MIAMI, FL 33144

Current Mailing Address:

702 SW 57 AVE
MIAMI, FL 33144 US

FEI Number: 26-3392622

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUTIERREZ, DEYANIRA
4760 SW 143 AVENUE
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
Name GUTIERREZ, DEYANIRA
Address 4760 SW 143 AVENUE
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: DEYANIRA GUTIERREZ

PRESIDENT

01/24/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date