

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000016114

Entity Name: JOSELINE CARE SERVICES INC

Current Principal Place of Business:

1546 NE 8 STREET
APT 207
HOMESTEAD, FL 33033

Current Mailing Address:

1546 NE 8 STREET
APT 207
HOMESTEAD, FL 33033 US

FEI Number: 27-1963689

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CENTENO, IRIS
1546 NE 8 STREET
APT 207
HOMESTEAD, FL 33033 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 CENTENO, IRIS
Address 1546 NE 8 STREET
APT 207
City-State-Zip: HOMESTEAD FL 33033

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: IRIS CENTENO

P

05/01/2019

Electronic Signature of Signing Officer/Director Detail

Date