

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000072461

Entity Name: CONCORDIA HEALTHCARE HOLDINGS, INC.**Current Principal Place of Business:**10685 N KENDALL DRIVE
MIAMI, FL 33176**Current Mailing Address:**10685 N KENDALL DRIVE
MIAMI, FL 33176 US**FEI Number: 27-3766484****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**IZHM SERVICES, INC.
500 S. DIXIE HIGHWAY
SUITE 302
CORAL GABLES, FL 33146 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	D
Name	SALADRIGAS, CARLOS A
Address	11000 SW 83 AVE.
City-State-Zip:	MIAMI FL 33156

Title	D
Name	SALADRIGAS, ELISA M
Address	11000 SW 83 AVE.
City-State-Zip:	MIAMI FL 33156

Title	D
Name	SALADRIGAS, CARLOS A JR.
Address	10003 SW 89 CT
City-State-Zip:	MIAMI FL 33176

Title	PRESIDENT & CEO
Name	PEREZ, MAGIN
Address	10685 N KENDALL DRIVE
City-State-Zip:	MIAMI FL 33176

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: MAGIN PEREZ**PRESIDENT & CEO****03/16/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date