

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000038404

Entity Name: SBL HEALTHCARE, P.A.

Current Principal Place of Business:

8753 NW 37TH PL
COOPER CITY, FL 33024

Current Mailing Address:

8753 NW 37 PL
COOPER CITY, FL 33024 US

FEI Number: 45-5139243

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAROSA, SARAH B
8753 NW 37TH PL
COOPER CITY, FL 33024 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: SARAH LAROSA

04/27/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PSD
Name LAROSA, SARAH
Address 8753 NW 37TH PL
City-State-Zip: COOPER CITY FL 33024

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: SARAH LAROSA

PSD

04/27/2016

Electronic Signature of Signing Officer/Director Detail

Date