

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000012486

Entity Name: COMPLETE HEALTH CARE INC

Current Principal Place of Business:

3201 GRIFFIN RD.,
STE 205
FORT LAUDERDALE, FL 33312

Current Mailing Address:

3201 GRIFFIN RD.,
STE 205
FORT LAUDERDALE, FL 33312 US

FEI Number: 61-1704594

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STARIKOV, ALBERT
15901 COLLINS AVE
SUITE 4305
SUNNY ISLES BEACH, FL 33160 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 STARIKOV, ALBERT
Address 15901 COLLINS AVE SUITE 4305
City-State-Zip: SUNNY ISLES BEACH FL 33160

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: ALBERT STARIKOV

P

01/27/2016

Electronic Signature of Signing Officer/Director Detail

Date