

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000022367

Entity Name: HEALTHCARE ENDEAVORS INC

Current Principal Place of Business:

3403 POWERLINE ROAD
SUITE 805
OAKLAND PARK, FL 33309

Current Mailing Address:

3403 POWERLINE ROAD
SUITE 805
OAKLAND PARK, FL 33309 US

FEI Number: 46-5010704

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANZONI, JEFFREY
1850 S OCEAN DR
4310
HALLANDALE BEACH, FL 33009 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 FRANZONI, JEFFREY
Address 1850 S OCEAN DR # 4310
City-State-Zip: HALLANDALE BEACH FL 33486

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: JEFFREY FRANZONI

PRINCIPAL

03/14/2018

Electronic Signature of Signing Officer/Director Detail

Date