

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000004377

**Entity Name:** EAST HILLS MEDICAL SERVICES, PA

**Current Principal Place of Business:**

3700 S OCEAN BLVD  
#1204  
HIGHLAND BEACH, FL 33487

**Current Mailing Address:**

3700 S OCEAN BLVD  
#1204  
HIGHLAND BEACH, FL 33487

**FEI Number:** 81-1190099

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MARKS, HELEN  
3700 S OCEAN BLVD  
#1204  
HIGHLAND BEACH, FL 33487 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,D  
Name MARKS, HELEN  
Address 3700 S OCEAN BLVD, #1204  
City-State-Zip: HIGHLAND BEACH FL 33487

*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:** HELEN MARKS

**PRESIDENT**

**01/21/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date