

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000030334

Entity Name: AMERICAN HEALTH CAPITAL, INC.

Current Principal Place of Business:

1010 FIFTH AVENUE SOUTH
SUITE 303
NAPLES, FL 34102

Current Mailing Address:

1010 FIFTH AVENUE SOUTH
SUITE 303
NAPLES, FL 34102

FEI Number: 61-1790652

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOVATT, JEFF ESQ.
1415 PANTHER LANE
SUITE 327
NAPLES, FL 34109 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 DPST
Name REED, THOMAS W
Address 1010 FIFTH AVENUE SOUTH, SUITE
303
City-State-Zip: NAPLES FL 34102

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: THOMAS W. REED

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04/15/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date