

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000003195

Entity Name: P R FAMILY HEALTH CARE CORP

Current Principal Place of Business:

5373 HICKORY DOWNS WAY
ST. CLOUD, FL 34771

Current Mailing Address:

8924 RIVER BLUFF
SANT ANTONIO, TX 78255 US

FEI Number: 81-5106485

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMOS, JOSE S
2344 CRESTOVER LN
WESLEY CHAPEL, FL 33544 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 PD
Name QUESADA, ANGEL M
Address 8924 RIVER BLUFF
City-State-Zip: SANT ANTONIO TX 78255

Title ST
Name PENA, BERENICE
Address 8924 RIVER BLUFF
City-State-Zip: SANT ANTONIO TX 78255

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: ANGEL M QUESADA

PRESIDENT

03/27/2021

Electronic Signature of Signing Officer/Director Detail

Date