

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000028155

Entity Name: NOA MEDICAL INVESTMENT INC

Current Principal Place of Business:

5390 W 21ST CT
#212
HIALEAH, FL 33016

Current Mailing Address:

5390 W 21ST CT
#212
HIALEAH, FL 33016 US

FEI Number: 82-1026618

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOA, NELSON
5390 W 21ST CT
#212
HIALEAH, FL 33016 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 NOA, NELSON
Address 5390 W 21ST CT
#212
City-State-Zip: HIALEAH FL 33016

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: NELSON NOA

PRES.

06/23/2020

Electronic Signature of Signing Officer/Director Detail

Date