

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000028719

Entity Name: E HEALTHCARE OPTIONS INC.

Current Principal Place of Business:

638 TONI STREET SW
PALMBAY, FL 32908

Current Mailing Address:

638 TONI STREET SW
PALMBAY, FL 32908

FEI Number: 46-2631629

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRZYBYLSKI, HEATHER
638 TONI STREET SW
PALMBAY, FL 32908 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 PRZYBYLSKI, HEATHER
Address 638 TONI STREET
City-State-Zip: PALMBAY FL 32908

Title VP
Name LOUSTAUNAU, JOAQUIN
Address 13618 STOCKBROOK RD
City-State-Zip: MORENO VALLEY CA 92553

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: PRZYBYLSKI , HEATHER

MANAGER

03/27/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date