

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000049232

Entity Name: SAN ROMAN HEALTH CARE INC

Current Principal Place of Business:

2619 SW 32 CT
MIAMI, FL 33133

Current Mailing Address:

2619 SW 32 CT
MIAMI, FL 33133 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAN ROMAN, EVELYN
2619 SW 32 CT
MIAMI, FL 33133 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 SAN ROMAN, EVELYN
Address 2619 SW 32 CT
City-State-Zip: MIAMI FL 33133

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: EVELYN SAN ROMAN

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04/18/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date