

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000063482

Entity Name: OMI CARE CORP

Current Principal Place of Business:

35 WEST 13TH STREET
APT # 1
HIALEAH, FL 33010

Current Mailing Address:

35 WEST 13TH STREET
APT # 1
HIALEAH, FL 33010 US

FEI Number: 83-1344726

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODRIGUEZ GASCON, ODETTE
35 WEST 13TH STREET
APT # 1
HIALEAH, FL 33010 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 RODRIGUEZ GASCON, ODETTE
Address 35 WEST 13TH STREET
APT # 1
City-State-Zip: HIALEAH FL 33010

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: ODETTE RODRIGUEZ GASCON

PRESIDENT

03/27/2020

Electronic Signature of Signing Officer/Director Detail

Date