

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000093403

Entity Name: TRUE HEALTH PHARMACY CORP.

Current Principal Place of Business:

8504 NW 103
HIALEAH GARDENS, FL 33016

Current Mailing Address:

8504 NW 103
HIALEAH GARDENS, FL 33016

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELOY RODRIGUEZ, MARIA C
8504 NW 103 ST
HIALEAH GARDENS, 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 P
Name ELOY RODRIGUEZ, MARIA C
Address 8054 NW 103 ST
City-State-Zip: HIALEAH GARDENS 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: MARIA C ELOY RODRIGUEZ

PRESIDENT

04/30/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date