

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000010886

Entity Name: ADB HEALTH SERVICES CORP

Current Principal Place of Business:

24885 SW 119 AVE
HOMESTEAD, FL 33032

Current Mailing Address:

24885 SW 119 AVE
HOMESTEAD, FL 33032 US

FEI Number: 83-3593241

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEN FINANCIAL SERVICES INC
10500 NW 26 ST STE A101
DORAL, FL 33172 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 PS
Name GONZALEZ, DAIRANELYS
Address 24885 SW 119 AVE
City-State-Zip: HOMESTEAD FL 33032

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: DAIRANELYS GONZALEZ

PRESIDENT

09/02/2020

Electronic Signature of Signing Officer/Director Detail

Date