

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000023225

**Entity Name:** ANGEL & EE HEALTH SERVICES INC

**Current Principal Place of Business:**

12190 SW 221 ST  
MIAMI, FL 33170

**Current Mailing Address:**

12190 SW 221 ST  
MIAMI, FL 33170

**FEI Number: 85-1336413**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GOMEZ DEL VALLE, RAYSA  
12190 SW 221 ST  
MIAMI, FL 33170 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 GOMEZ DEL VALLE, RAYSA  
Address 12190 SW 221ST STREET  
City-State-Zip: MIAMI FL 33170

*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: RAYSA GOMEZ DEL VALLE**

**PRESIDENT**

**03/01/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date