

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000024777

Entity Name: PHYSICIAN HEALTH CENTER CORP

Current Principal Place of Business:

1150 NW 72 AVE
SUITE 450
MIAMI, FL 33126

Current Mailing Address:

1150 NW 72 AVE
SUITE 450
MIAMI, FL 33126 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, JACQUELINE
1150 NW 72 AVE
SUITE 450
MIAMI, FL 33126 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: GARCIA JACQUELINE

02/02/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name GARCIA, ALAIN
Address 1150 NW 72 AVE
SUITE 450
City-State-Zip: MIAMI FL 33126

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: GARCIA ALAIN

PD

02/02/2021

Electronic Signature of Signing Officer/Director Detail

Date