2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000065764

Entity Name: VOP VIRTUAL OUTPATIENT PROGRAM CORP

FILED Apr 27, 2022 **Secretary of State** 1450749007CC

Current Principal Place of Business:

621 CAPE CORAL PARKWAY EAST

SUITE 2

CAPE CORAL, FL 33904

Current Mailing Address:

621 CAPE CORAL PARKWAY EAST SUITE 2

CAPE CORAL, FL 33904 US

FEI Number: 85-2741208 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERNANDEZ, MAE 621 CAPE CORAL PARKWAY EAST SUITE 2 CAPE CORAL, FL 33904 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title D

Name SANTILLANA, FRANCISCO A Name FERNANDEZ, TOMMY R

621 CAPE CORAL PARKWAY EAST 621 CAPE CORAL PARKWAY EAST Address Address

STE 2 STE 2

City-State-Zip: CAPE CORAL FL 33904 City-State-Zip: CAPE CORAL FL 33904

Title Title S Α

Name SALCEDO, ARNOLD R Name PISCANI, EVA S

Address 621 CAPE CORAL PARKWAY EAST Address 621 CAPE CORAL PARKWAY EAST

STE 2 STE 2

City-State-Zip: CAPE CORAL FL 33904 City-State-Zip: CAPE CORAL FL 33904

Title AR Title

SALCEDO MENA, VALERIE C MAE, FERNANDEZ Name Name

621 CAPE CORAL PARKWAY EAST 621 CAPE CORAL PARKWAY EAST Address Address STE 2 STE 2

City-State-Zip: CAPE CORAL FL 33904 City-State-Zip: CAPE CORAL FL 33904

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.