

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000004027

Entity Name: ACOSTA NURSING CARE INC

Current Principal Place of Business:

560 NW 124TH AVE
MIAMI, FL 33182

Current Mailing Address:

560 NW 124TH AVE
MIAMI, FL 33182 US

FEI Number: 86-1247806

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ACOSTA, LAURA B
560 NW 124TH AVE
MIAMI, FL 33182 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 ACOSTA, LAURA B
Address 560 NW 124TH AVE
City-State-Zip: MIAMI FL 33182

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: ACOSTA , LAURA B

PRESIDENT

03/14/2024

Electronic Signature of Signing Officer/Director Detail

Date