

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000005864

Entity Name: YOUR MEDICAL PARTNER, INC.

Current Principal Place of Business:

3802 LANCEWOOD DRIVE
CORAL SPRINGS, FL 33065

Current Mailing Address:

3802 LANCEWOOD DRIVE
CORAL SPRINGS, FL 33065 US

FEI Number: 87-3560306

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZARINS TENENBAUM, NICOLE
3802 LANCEWOOD DRIVE
CORAL SPRINGS, FL 33065 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 D
Name ZARINS TENENBAUM, NICOLE
Address 3802 LANCEWOOD DRIVE
City-State-Zip: CORAL SPRINGS FL 33065

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: NICOLE ZARINS TENENBAUM

D

03/13/2025

Electronic Signature of Signing Officer/Director Detail

Date