

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000071264

Entity Name: ELBA HEALTH SYSTMES, CORP.

Current Principal Place of Business:

5750 NW 186 STREET
204
HIALEAH, FL 33015

Current Mailing Address:

5750 NW 186 STREET
204
HIALEAH, FL 33015

FEI Number: 87-2162469

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORA, ELBA MARIA
5750 NW 186 STREET
204
HIALEAH, FL 33015 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 MORA, ELBA MARIA
Address 5750 NW 186 STREET UNIT 204
City-State-Zip: HIALEAH FL 33015

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: MORA , ELBA MARIA

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04/29/2022

Electronic Signature of Signing Officer/Director Detail

Date