

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000026037

Entity Name: AMERICAN NURSING CARE CORP

Current Principal Place of Business:

10300 SW 72 ST
STE 176
MIAMI, FL 33173

Current Mailing Address:

10300 SW 72 ST
STE 176
MIAMI, FL 33173 US

FEI Number: 88-1373211

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLIVA GONZALEZ, AYLEN
20950 SW 119 CT
MIAMI, FL 33177 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 OLIVA GONZALEZ, AYLEN
Address 20950 SW 119 CT
City-State-Zip: MIAMI FL 33177

Title VP
Name BARRERAS MILANES, INGRID
Address 14201 SW 147TH PL
City-State-Zip: MIAMI FL 33196

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: INGRID BARRERAS MILANES

VP

04/18/2025

Electronic Signature of Signing Officer/Director Detail

Date